

# Chemist & Druggist

Benn >>

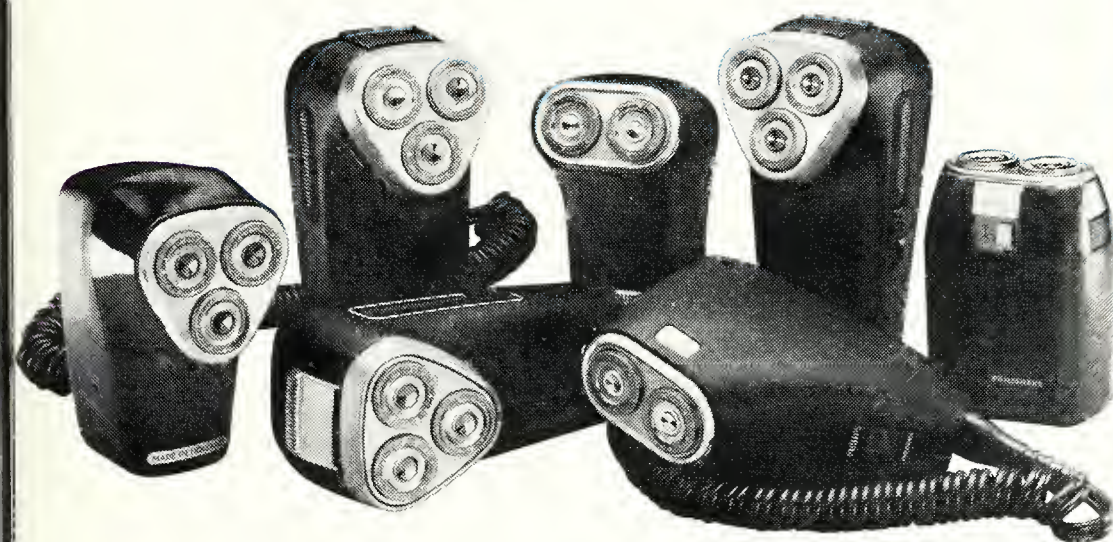
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THE NEWSWEEKLY FOR PHARMACY



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pharmacists?**

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**LPCs given  
more 'advice'  
on the offer**

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**Call for poll  
of contractors**

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**'Disunity puts  
MP's support  
at risk'**

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Trident	Radio (Metro, Hallam, Tees, Pennine)	Television
Border		Television
Scotland	Radio (Clyde, Forth)	Television



# Chemist & Druggist

The newsworthy for pharmacy

October 1977 Vol. 208 No. 5086

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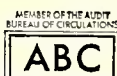
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# Comment

## Day of decision

Does anyone really know where we are going, where we should be going—or even where we want to go?

Those questions must surely be asked by many rank-and-file contractors following the abundance of conflicting advice thrown at them on the remuneration offer (more this week in *C&D* from Messrs Worby, Darling and Lewis Priest).

But the alternatives, if not the issues facing contractors, are clear enough. They may accept the offer as now recommended by PSNC and then go all out for more (Mr Priest hints that the Minister might be better disposed towards improving remuneration once he is sure that the money will go into the pockets of those who need it and who are essential to the service rather than the larger contractors who have been shown to be receiving more than a fair share).

The other option open to contractors is to reject the offer out of hand and take whatever action is necessary to prove once and for all that pharmacy has reached the end of the road and is prepared to fight for its own survival. There is no doubt that the one thing all contractors are agreed upon is that the offer is inadequate—whether it is derisory, divisive or a genuine attempt by the Secretary of State to redress the imbalance between smaller and larger contractors' actual profit margins is the question in dispute.

Having been led to a position in which they anticipated that anything short of an adequate offer would be deemed unacceptable by PSNC, we believe that contractors were in a mood to take whatever action their leaders asked in support of the claim. But the issues have become clouded since the offer was made, and it seems doubtful whether there is quite the same unanimous resolve as existed a few weeks ago. If that is the case, then there would be no point entering the fight with some of the troops doubting whether they were doing the right thing.

Sunday's meeting must surely represent a watershed in the history of PSNC. Will Mr Worby be leading a united committee, determined to prove that contractors' remuneration—and in some cases, even their fate—is in the right hands? Or will there be disunity, coupled with frustration on the floor of the meeting, resulting in contractors finding themselves effectively leaderless and unrepresented at the end of the day?

Clearly the latter alternative cannot be contemplated, but it will be the responsibility of the platform to ensure that the LPC representatives come away from Lambeth feeling they have made the right decisions and that they and the PSNC can carry the rank-and-file with them.

As Miss Tomison, the Society's head of publicity warns this week (p 466), the apparent disunity in the profession puts at risk the continued support of MPs. Sunday's meeting *must* demonstrate that pharmacy knows where it is going.

Benn

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# 'Clothier Committee report favours pharmacists'

The conclusions of the Clothier committee on rural dispensing are believed to be weighted for the pharmacist with few concessions for the dispensing doctor claims an article in last week's *Pulse*. The article says the draft report (apparently "leaked" to *Pulse* from the doctors' side) is understood to recommend that changes in dispensing arrangements in rural areas should be decided by an independent national authority representing patients, doctors and pharmacists.

This body, to be headed by a government-appointed lay chairman, would have equal numbers of pharmacists, doctors appointed by the General Medical Services Committee and representatives of the National Association of Community Health Councils. It would regulate the setting up of new pharmacies in areas where there have so far been none; granting a doctor permission to start NHS dispensing (other than for patients who come under the "serious difficulty

criterion"); and the extension of NHS dispensing by a doctor to patients who live in an area not previously included in his dispensing domain. It is suggested that this authority would give approval for pharmacies without geographical limits but would define the area for which doctors could dispense.

However, this draft may bear little relationship to the final report, says *Pulse*, as it is believed unlikely that the rural practices subcommittee of the GSMC would ratify it without major alterations—which "are unlikely to be accepted by representatives of the Pharmaceutical Society". Members of the Clothier committee seem prepared to still consider fundamental changes to their conclusions if they prove unacceptable to either the pharmaceutical or medical professions.

The Pharmaceutical Society has said that only pharmacists serving on the committee have seen the report—and they will not comment on the "leak".

## Bob Worby's pre-conference statement

Mr Bob Worby, chairman of the Pharmaceutical Services Negotiating Committee, has sent the following letter to *C&D*, setting out his final position before Sunday's LPC conference:—

Despite repeated statements and circulars there would still appear to remain, in some quarters, an element of misunderstanding as to the consistency of the views and guidance expressed by PSNC and by myself as its chairman before and after our meetings with Mr Ennals.

I did indeed say that I considered it unlikely that unity of action would be achieved in opposition to a proposal by the Secretary of State which benefitted 70 per cent of contractors. That is why PSNC felt that any attempt to reject the entire "offer" would be unlikely to be successful.

In the light of the 1976 conference decision to press for more money to enable contractors of differing sizes to obtain their appropriate share of NHS remuneration, rejection of the principle of equity would be quite illogical. Certainly the Secretary of State has refused the money required to create equity at a viable level. It is, however, very clear that the "offer" made by the Secretary of State falls into two distinct parts:—

(a) The redistribution proposals—under which £5m comes back into the balance sheet and 70 per cent of contractors benefit. This we recommended.

(b) The rejection of our claims for an increase in the percentage return on capital. This we have most certainly not accepted and have recommended continued action to achieve the improvement necessary to make the pharmaceutical operation viable.

To reject the principle of redistribution out of hand would, I feel, be a grave mistake, both politically and tactically. It would lay us open not only to a charge of inconsistency, but also to the accusation that we were thus deliberately perpetuating our own high rate of closures of smaller pharmacies. The scheme could, however, be amended in detail and this will doubtless be the subject of debate at the conference. To accept, on the other hand, the rejection of our demands for a proper return on capital, would be unthinkable and totally disastrous.

On both these issues, decisions must be made by conference. In the case of the return on capital, or "profit margin" as it is frequently described, it must be broadly a decision between action in the form of sanctions or resort to arbitration.

In so far as the motion calling for the resignation of the entire PSNC, I take these very seriously indeed. One cannot but wonder how the Secretary of State must smile when he sees some of our guns turned upon our own General Staff at the first sound of battle. He knows, however,

as well as I do, that these calls express bitterness and frustration felt by all contractors in the present situation.

The PSNC, and its chairman, implement the decisions of conference and it is for the conference, and for conference alone, to decide upon the form of action to be taken.

The issues have been repeatedly clearly set out, and it is to be hoped conference will stick to those broad issues and the principles involved, and that it will not get itself bogged down with the fine details which are better left to the Committee.

The anger and frustration of contractors, to which I referred at Swansea, has been strongly ventilated in the Press. The final assessment of the strength of determination of a profession so unjustly treated by the Secretary of State can only be made at and by conference on Sunday.

## PSNC frustrating LPC wishes on elections?

An attack on the failure of the Pharmaceutical Services Negotiating Committee and the National Pharmaceutical Association to take action on a resolution passed at last year's LPC conference has been launched by Lincolnshire LPC. Speaking at the Lincs annual conference last weekend (see also p 491) the secretary, Mr Graham Walker, expressed LPC's disquiet that PSNC was only to give a verbal report on the motion—which called on NPA to name its nominees in advance of the PSNC elections—at the end of next Sunday's conference. By not informing LPCs of the decision, PSNC had effectively prevented a desirable reform in its constitution for another four years (the next election is in January 1978). It was a planned attempt to frustrate the wishes of the 1976 conference but Mr Walker hoped there might still be time for a constructive proposal in line with the spirit of the resolution, to emerge from NPA before next Sunday.

Lincolnshire chairman, Mr Bernard Lewis, later explained his committee's position. The Committee first became concerned after the 1974 regional election. "Within our region there were seven or eight candidates, three of whom were members of the then NPU Executive. One of those was elected by the region but the two who were unsuccessful were then appointed to the PSNC by the NPU."

"The NPA currently appoints its PSNC members for only one year while the regionally elected members have a four-year term of office, so it is not surprising that NPA Board members wish to stand for PSNC both ways and hence get two bites at the cherry. It could well be that the best solution would be for the NPA nominee to have a three-term year of office; the regionally elected members to serve for three years instead of four as at present and the NPA elections to be held in advance of the PSNC elections."



# Grunwick pickets out again

Pickets supporting the Grunwick film processing strikers have been active again, this time at W. A. Weston Ltd, Ealing (not part of the multiple group of that name). The pickets handed out leaflets which asked that films for processing be taken elsewhere. Customers were not prevented from entering the shop although the manager, Mrs M. George, felt elderly people had tended to keep away. The police were called and kept the pickets under surveillance. One picket called in the shop to collect a film that he had previously left for processing. Later a group supporting the Grunwick antistrikers appeared but there was little disturbance. Both groups left at the onset of rain.

## Patient given wrong capsules twice

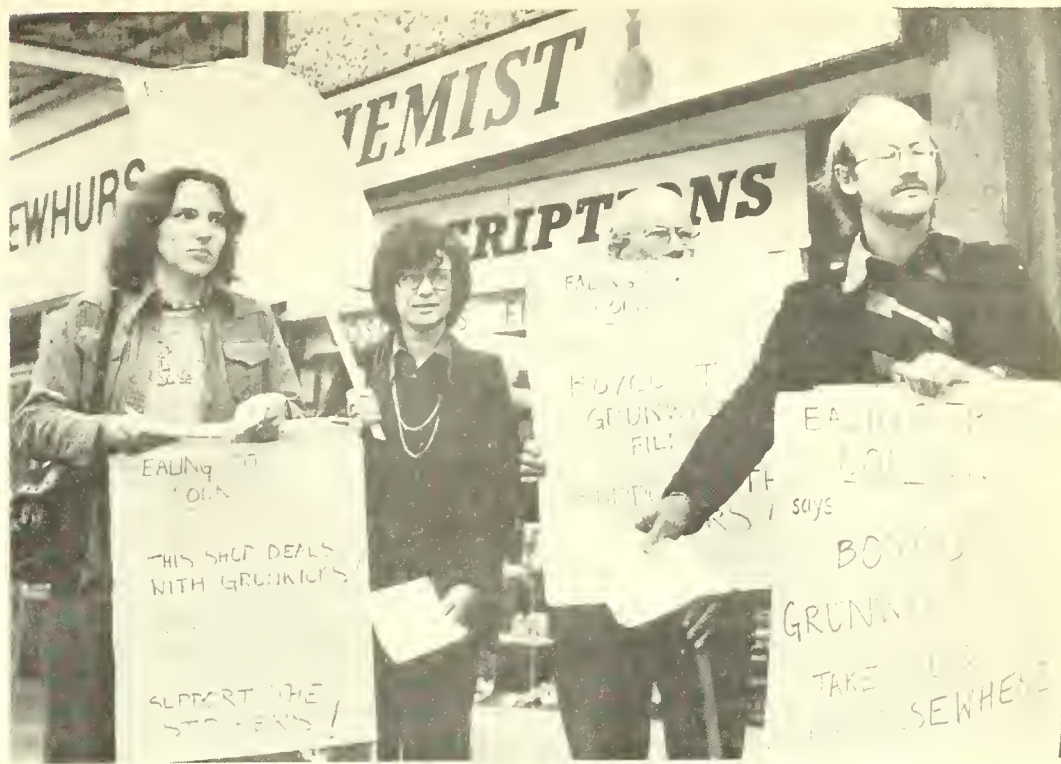
A dispensing error, repeated when the patient called for the remainder of the prescription has led to a £100 "fine" for a chemist contractor. The case was considered serious enough by the Secretary of Social Services, Mr David Ennals, for him to double the amount (£50) recommended to be withheld by the Camden and Islington.

The patient was given Ponderax PA capsules instead of Ponstar capsules, with no directions as to how to take them. As the Ponderax made her feel ill she queried the dose she had been taking (two capsules four times daily, based on a previous prescription for an analgesic) when she returned for the remainder. The pharmacist advised her to reduce the dose to one capsule three times daily but again gave her Ponderax PA capsules. In explanation the superintendent pharmacist said that a prescription for 100 Ponderax had already been dispensed in part and was on the bench the same day the Ponstar prescription came in.

The FPC decided that the company was in breach of its terms of service and in making its recommendation that the company be censured and £50 withheld from its remuneration took into account a previous matter relating to dispensing.

## Unichem meeting

Representatives of the Pharmaceutical Society's Council met Unichem Ltd on Monday to discuss the company's use of the restricted title "chemist" in its advertising. No statement was issued.



Picture courtesy Ealing Gazette

## Industry goes on promotion 'offensive'

The days of the pharmaceutical industry being defensive about its sales promotion are over—today that promotion is making a positive contribution to medicine and the industry's economics. That claim was made this week by Mr George Teeling-Smith, director of the office of Health Economics when launching a new OHE monograph, "Sources of Information for Prescribing Doctors in Britain" a report which also has something to say about the development of clinical pharmacy (see below).

The vociferous criticism of promotion related to a historical situation when, at the start of the therapeutic revolution, the industry had been the doctor's only source of information, today he had a multiplicity of sources. But Mr Teeling-Smith said it would be catastrophic to channel information entirely through the newer "official" sources because therapeutic advances took place in small steps—each of which would not be great enough for official sources to endorse—rather than great leaps forward. Each of these small steps had, however, to be "sold" to the prescriber so that experience was gained to provide a basis for the next pharmacological advance. As an example, Mr Teeling-Smith cited Valium which, at the time of its launch, might not have been recommended as the replacement for Librium that time had proved it to be.

The OHE report draws a distinction between the "general advice on overall patterns of prescribing" which should properly be provided by official sources and the "perhaps very different considerations which an individual doctor must take into account when facing a particular patient". It concludes that in the latter context doctors are right often to prefer commercial rather than official sources of prescribing information.

The report claims that the rising trend in

barbiturate prescribing has, since 1965, been reversed largely by "very extensive competitive promotion for the alternative benzodiazepines".

Nevertheless, the report says the industry recognised the importance of encouraging sources of information to function in parallel with its own—including under that heading closer liaison with the pharmaceutical profession and university departments of clinical pharmacology.

Clinical pharmacy, the report suggests, represents an attempt to bridge the gap between the traditional role of the pharmacists as "experts on medicines" and that of the prescribers and clinical pharmacologists as "experts on their use." It goes on: "The hierarchy of administrative pharmacists in the reorganised NHS could possibly provide a structural basis for such a development. However, it is important... to emphasise that if 'clinical pharmacy' does flourish as a speciality it too should grow up alongside the existing direct channels of communication between the pharmaceutical industry and prescribers, rather than attempting to supersede them."

The report is available, price £1 from the OHE at 162 Regent Street, London W1R 6DD.

## Changes to Poisons List

Carbofuran, oxamyl, mephosfolan and triazophos are to be added to Part II of the Poisons List from October 17 under The Poisons List Order 1977 (SI No 1520, HM Stationery Office, £0.10). Requirements and restrictions relating to the compounds are imposed under The Poisons (Amendment) Rules 1977 (SI No 1519, HM Stationery Office, £0.15). An exemption for alphachloralose when used as a rodenticide is also in the amendments.



# MPs' support put at risk by disunity

Pharmacy risks losing the goodwill that has been built up recently among MPs and others because it seems to be speaking with too many different voices—a profession unsure of what it is asking for. That clear warning was given by Miss Maureen Tomison, the Pharmaceutical Society's head of publicity, in reply to a toast to the Society at a Slough Branch dinner last weekend.

Stressing that her remarks were addressed to pharmaceutical politics in general—not specifically to Council or the Pharmaceutical Services Negotiating Committee—Miss Tomison argued that the profession seemed to be in disarray. Yet internecine strife must be short-sighted and destructive at a time when pharmacy was facing a crisis as serious as any in recent years.

Successful communications demanded credibility, clarity and consistency. For the picture of an expert on medicines, ever ready with advice, which Miss Tomison was trying to promote the pharmacist needed to come out from the dispensary and meet the public—the responsibility for presenting a credible image therefore rested with every pharmacist. It was easy for a journalist to secure publicity, but again in order that the publicity should be credible the case presented must not be

extravagant, must acknowledge the problems faced by the profession—and take into account the professional case.

Turning to "clarity", Miss Tomison felt that many MPs were now totally confused because pharmacy was failing to put over an unequivocal case. The profession needed to be more certain about its objectives if it was to stand any chance of convincing Parliament that it deserved support. There was now neither clarity nor consistency and without those conditions Miss Tomison was unable to advise the many MPs who had generously given their support and were offering to continue to do so. "What now are we asking for?" she demanded. As the person responsible for promoting the case Miss Tomison no longer knew what the profession wanted the MPs to do—and that was tragic. It was not her role to make policy: "Give me the policies—clear, credible and consistent—and together we can go out and win."

The toast to the Society had been proposed by Mr Michael Shersby, MP for Uxbridge, who congratulated Miss Tomison on the effectiveness of the representations made to MPs on behalf of the profession. It was vital that pharmacy's voice should be heard, and the information flow must therefore be continued.

director for home safety, Mrs Elspeth Maclean, highlighted the hazard that child-resistant containers could present to the elderly, the infirm and the handicapped. She said that such people might use a potentially dangerous implement such as a tin opener or knife to open these containers. Once opened, after such effort, there was a temptation not to replace the lid.

## New distributor for Village bath products

The distribution agreement for Village bath products in the UK, held by Fassett and Johnson Ltd, is being transferred to Mr Kenneth J. Fowler, who recently resigned from Fassett and Johnson and was responsible for initiating the original agreement with Village bath products inc and the UK launch earlier this year. The products will be sold through a restricted number of department stores and chemists. All communications should continue to be addressed to 123 Dawson Road, Bletchley, Milton Keynes MK1 1JT (Telephone 0908 71281).

## Scottish pharmacists' Gourock conference

"The role of the pharmacist in health education" is the theme of this year weekend conference of Scottish pharmacists, to be held at the Gantock Hotel Gourock, November 6-7. The speakers are Mr J. K. Macrae, professional adviser to the Scottish Council for Health Education, and Mr I. M. W. Caldwell, a general practice pharmacist. The Sunday programme also includes the sixth Macmorran lecture, given by Sir William Ferguson Anderson, David Cargill, professor of geriatric medicine at the University of Glasgow, on "Drugs and the elderly".

Residential accommodation and conference (including dinner and dancing on Saturday evening) costs £17 per person in twin or double rooms or £19 in single rooms. Day tickets for Sunday are £5.50 and dinner and dance tickets £4. Request for booking forms should be sent to the staff pharmacist, Pharmaceutical Society of Great Britain, 36 York Place, Edinburgh EH1 3HU, and should be returned by October 21. Final year pharmacy students and those undergoing pre-registration training, may attend on Sunday free or at the basic cost of the luncheon if taken (bookings to the staff pharmacist).

## Price Commission looks at Metal Box

The Price Commission is to investigate certain price increases of Metal Box Ltd. The company intended to increase charges for open top, beverage and aerosol cans.

The usual effect of the Commission's decision to investigate is that the price increases proposed may not be implemented during the period of the investigation which must be completed within three months. However, the Commission is able to allow interim price increases, and is obliged to do so to the extent to which the safeguard provisions operate. In the case of Metal Box the Commission has decided there should be an interim price increase to take account of a particular problem, the costs of raw materials especially of tinsplate. Any representations should be made to the secretary, Price Commission, Neville House, Page Street, London SW1.

## Chemical trade seminar

The British Chemical and Dyestuffs Traders' Association is organising a seminar next week (October 16) on "The Health and Safety at Work Act 1974 and the chemical trader". The seminar, which is open to non-members, will be held at a hotel near Macclesfield, Cheshire, fee £15 plus VAT, including luncheon. Details from the Association at 12b Westminster Palace Gardens, Artillery Row, London SW1P 1RL (telephone 01-222 5292).

## Supersafe Gran advises on medicines

The Royal Society for the Prevention of Accidents has launched a campaign aimed at reducing the number of home accidents due to accidental poisoning, falls, do-it-yourself and burns and scalds. Each year about 6,500 people die and another one and half million are injured in accidents in the home. The Supersafe family—Mum, Dad and Gran—will be introduced to the public by posters and leaflets in clinics, health centres and doctors surgeries.

Unusually, Supersafe Gran has been chosen as the member of the family to put across the safe use of medicines. The Society thinks campaigns that emphasise the danger of medicines to children give a false sense of security to families with no children. Elderly people often are the only members of the family taking medicines and Supersafe Gran draws attention to this. Her advice is to take all unused medicines back to the chemist, never to take other people's medicines and to keep all drugs in locked cupboards.

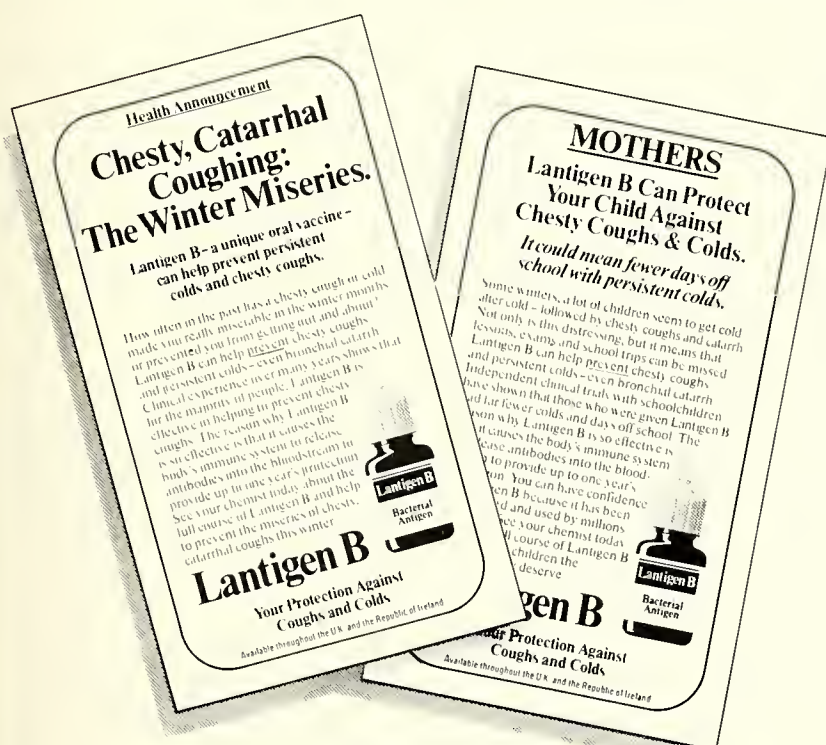
Launching the campaign, the Society's



## Health Announcement

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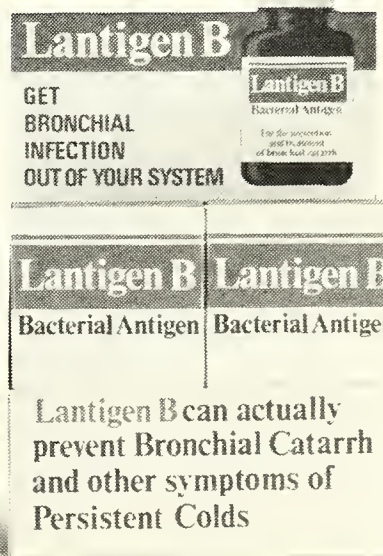
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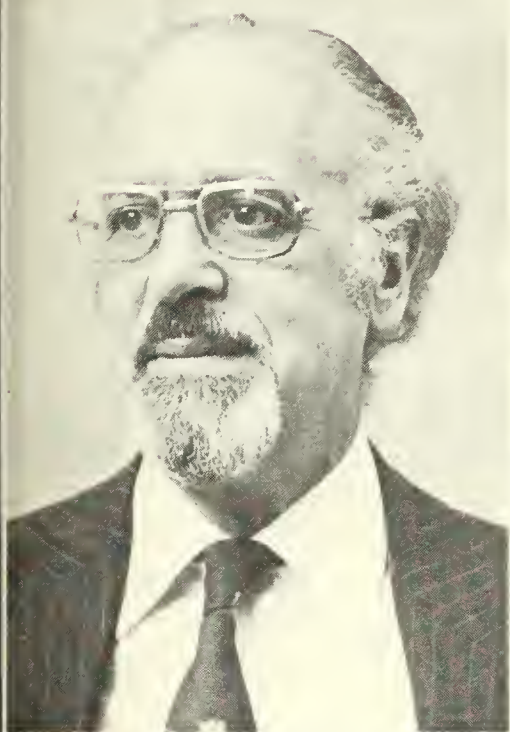
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# People



**Mr Harold Godfrey, MPS**, who has been marketing manager of Norgine Ltd for the past 11 years, will be leaving the company at the end of the year to establish an independent consultancy providing services and expertise to the ethical pharmaceutical industry.

## News in brief

□ The Medicines (Breathing Gases) Order 1977 (SI No 1488, HM Stationery Office, £0.10) comes into force October 4 and specifies gases which in certain circumstances are excluded from the application of the Medicines Act 1968.

□ The Japanese Ministry of Health and Welfare has established guidelines for the directions to be printed in Japanese on the packaging of drugs sold over the counter. Manufacturers and importers have been asked to conform to these guidelines by August 10, 1978. No further details are yet available.

□ A guidance note "Articles and substances for use at work" published by the Health and Safety Commission is aimed at designers, manufacturers, importers, suppliers, erectors and installers, who have duties and obligations under the Health and Safety at Work Act (HM Stationery Office, £0.30).

## Beecham supplies back to normal

It is hoped that supplies of Quosh and Ribena will soon be more readily available again following the end of a strike at Beecham's Coleford factory. The workers voted to return to work last week and it

# Topical reflections

BY XRAYSER

## Non-compliance

The address to the Sheffield Conference on patient non-compliance with drug regimens brings to our attention the important and continuing role of the pharmacist as a vital link in health care. Dr P. Noyce, principal pharmacist in drug information to the North West Thames Regional Health Authority, examined the main reasons for non-compliance and how pharmacists might be of help. He suggests that rather than adopting a blanket approach to improving compliance, a more practical approach is to concentrate on those situations where non-compliance is known to lead to serious consequences (p400).

It would be difficult, I think, to differentiate, and I have found it takes little time to satisfy oneself that the instructions are clear. It will generally be found that the patient is vague in the matter of the doctor's verbal instructions, as Dr Noyce pointed out, but much of the uncertainty could be eliminated if the prescriber wrote clear directions on his prescription, and the pharmacist transcribed them carefully and neatly on to the label. But it is important to remember that the pharmacist is the final link in the chain, and after the medicine has passed through his hands the patient is on his own.

Dr Noyce referred to a recent survey in which it was discovered that five out of twelve patients did not remove the wrappers from suppositories before use. After an experience of many years, one learns never to take anything for granted. I have myself foreseen the possibility of that happenining, incredible as it may seem, and have ventured to remind the patient to remove the wrapping before use. It may be that the fault lies initially in the packaging and that suppositories should be enclosed in a form of Cellophane in strips. I once found it necessary to provide a free translation when the instructions provided with ear drops stipulated that they were to be inserted into the auricular orifice, and the patient was duly grateful.

I agree that verbal reiteration of label instructions fixes them in the patient's mind and provides an opportunity to resolve any conflict between what the patient remembers of the doctor's instruction and those on the label. If I had not—tactfully, as Dr Noyce suggests—asked questions concerning eye-drops, the patient would have instilled them into the wrong eye, for the prescriber wrote right, and the appearance of the left eye made it just possible the question was sinister in the extreme.

## Tropical diseases

Tropical diseases which many general practitioners have never seen are being increasingly imported into Britain, said Dr Peter Boreham in the Science award lecture to the Conference. He referred to the incidence of imported malaria, which had risen from 62 cases in 1966 to 1,220 in 1976, of which holidaymakers accounted for no fewer than 134 in 1966. The speaker said that such facts could no longer be ignored because of the increased speed and amount of travel. It was necessary, he said, for the drug industry to spend more money developing new drugs for tropical diseases; that medical checks should be applied to people arriving here from the tropics, and that more advice should be given to holidaymakers when they went to certain countries.

Dr Boreham is right to include speed as a factor. In the days of sea-travel the voyage could exceed incubation time, and it was obvious on arrival that something was wrong. Today, thousands of travellers are rapidly scattered through the whole country, and the onset of illness may not in the first instance, be attributed to the sojourn abroad. The world has changed.

was expected that normal production would have been resumed by Thursday, September 29.

The strike occurred because of a wage increase which stayed within the Stage 2 guidelines, the workers voted to strike in support of a claim for a larger increase. Beecham's felt that because of the agree-

ment entered into by the Government and the TUC, and indeed the union concerned, the TGW, they could not agree to an increase which broke the pay guidelines. The workers have now come into line and accepted the original offer with the proviso that a productivity agreement be negotiated.



# New products

## Cosmetics and toiletries

### Charlie's lip gloss

Revlon have introduced a lip gloss to the Charlie range of cosmetics. Charlie lip gloss (£0.99) is presented in a transparent triangular vial which contains a wedge shaped sponge applicator. This outlines like a brush yet fills in the colour at the same time providing "a really glossy shine". Available in four colours, melon crystal, bronze crystal, wine crystal and ruby crystal and a clear shine, clear crystal. As an added bonus for the consumer, for a limited period only, a 2oz Charlie fragrance spray in a denim pouch will be offered for £0.99 with one purchase from the cosmetic or fragrance collections (Revlon International Corporation Ltd, 86 Brook Street, London W1).

### Outdoor Girl nature series

Outdoor Girl have introduced a complete collection of skin care products (£0.65 each product). The Milk and Honey range is for dry skins and includes a cleanser, toner and moisturiser, as does the Herbal Remedy range for oily skins and the Cooling Fruit range for combination skins (Smith & Nephew Cosmetics Ltd, Hook Rise South, Surbiton, Surrey).

### Eylure "00" lash series

The "00 lash series" of false eyelashes from Eylure Ltd are described as "deceptively fine, deceptively natural . . . lighter than any other lash in the range . . . created to meet the increasing fashion demand for a more natural look". The

range will be promoted on a revolving wire merchandiser which will also hold Eylure fingernails. There is a trade price of £40.31 for a parcel containing a merchandiser, header card, 32 lash packs and 36 nail packs and including a bonus of six free nail packs and four free lash packs (Eylure Ltd, Grange Industrial Estate, Cwmbran, Gwent NP4 2XR).

## Rapport bath products

Max Factor have added three new products to their Rapport fragrance range. A perfumed bath powder (180g £3.25) is presented in a cherry red oval box with a translucent lid, with a generous satin-backed puff, also in cherry red. There is also a perfumed foaming bath (200ml £2.65) and perfumed hand and body lotion (200ml £2.53). Available for sale from October 15 (Max Factor Ltd, 16 Old Bond Street, London W1).

## Bath time warpaint

"Warpaint" is a new bubble bath gel for children from LR/Sanitas. It is available in three primary colours, Apache blue, Blood red and Teepee yellow, and can be painted on to children's bodies and down the side of the bath, say the manufacturers. And not only is it claimed to get the children clean as they splash about and make a rich foam, it also helps clean the bath afterwards. The three tubes come together in a "Wild West" outer (£1.05 for the three) (LR/Sanitas Ltd, Sanitas House, Stockwell Green, London).



## Haircare

### Medicated Pears

A & F Pears have introduced a medicated variant into the Pears Shampoo range. Pears medicated shampoo (introductory prices 250cc £0.59, 130cc £0.33, 80cc £0.23) has a formula which is said to be effective against scalp bacteria, to clear hair thoroughly "whilst still retaining the gentle and mild qualities associated with the Pears name".

Since its launch in April 1975, the company says that Pears shampoo has become the second largest selling brand in the non-medicated sector and fourth in the overall shampoo market. With the introduction of the new variant they anticipate capturing a large percentage of the medicated sector, "because research has shown that women regard most medicated shampoos as too harsh for everyday use". To help achieve this aim, the launch of Pears medicated shampoo will be supported by a national television advertising campaign worth £250,000 during November and December (Elida Gibbs Ltd, PO Box 10Y, Portman Square, London).

### Elseve Volume shampoo

L'Oreal have added Volume shampoo to their Elseve range (200cc £0.75, introductory offer £0.59). The company says that the shampoo not only cleans and beautifies but also brings fullness and body to lank, lifeless hair, whether it be normal, dry or even slightly greasy. Their research has shown that a minimum of 60 per cent of women are concerned about adding extra volume to their hair, and they add that consumer tests found the product to be successful in its claim.

The budget allocation for Elseve Volume for the period October 1977 to June 1978 is £700,000, £200,000 of which has been devoted to the launch television campaign. A door-to-door coupon campaign starts at the end of the month which offers householders 10p off either of the Elseve shampoos—Beauty or Volume—on top of the discounted price.







The new display stand from Eylure Ltd containing both false eyelashes and false nails

New products continued from opposite

### Dietary

#### *Energen low calorie jams*

RHM Foods Ltd have introduced a range of Energen low calorie jams and marmalades. Available in the five most popular flavours—strawberry, raspberry and blackcurrant, and thick cut and orange jelly marmalades (£0.43)—they are low in sugar and have a tangy, fruity flavour. The company says that because they have only half the calories of ordinary jams they are ideal for the weight conscious with a sweet tooth. The product contains both sugar and sorbetol, but is said to be suitable for diabetics. The launch is being supported in the slimming Press. The products are shrink wrapped in trays of twelve (RHM Foods Ltd, 10 Victoria Road, London NW10 6NU).

### Sundries

#### *14-day home wine*

Claimed to be the world's first ingredient pack to produce homemade wine in 14 days Cellar 14 is a concentrated grape juice compound capable of producing a gallon of red, white or rose table wine.

Packed in 1-kilo cans (£1.49) Cellar 14 is said to be the first "instant" home wine to rely on concentrated grape juice to provide all the sugar required for fermentation. No more sugar is added, although normal methods of winemaking can be employed.

According to Mr P. S. Engelhard, managing director of CWE, the introduction of Cellar 14 could lead to further expansion in the number of amateur winemakers in Britain. "For many would-be winemakers, time is a problem," he says "and to produce wine of quality at home hitherto required several months. This has discouraged many from making wine or resulted in unpleasant memories of drinking wines which were too young!" (Continental Wine Experts Ltd, Chapel Street, Cawston, Norfolk).

#### *Socks for swimming*

Haffenden-Richborough Ltd have introduced Britmarine latex "olympic socks" (£1.00). They are shaped like pull-on ankle socks for a waterproof fit with patterned soles to prevent slipping, are designed to guard against foot infections from swimming pools and are endorsed by gold medallist David Wilkie. "Olympic socks" are available in white and assorted colours in five sizes from usual sundry wholesalers (Haffenden-Richborough Ltd, Sandwich, Kent).

### Photographic

#### *Agfa slide frames*

The DIA G (100, £2.54), is a hinged glassless photographic slide mount with a corner finger notch for opening a slimline design and snap fastening. (Agfa-Gevaert, Ltd, Great West Road, Brentford, Middlesex).



# EAREX for EARWAX

Over the counter, over the years, millions\* of customers have appreciated the pharmacist's advice.

Earex for earwax problems.

Who better than the pharmacist to advise customers to use a little Earex to prevent earwax problems. And benefit from the continual support of a relieved customer.

**EAREX** gentle eardrops  
*The brand leader for earwax relief.*

Over the last 2 years 2,500,000 bottles of Earex have been bought through retail pharmacies.



# Prescription specialities

## EUHYPNOS capsules

Temazepam is a benzodiazepine with a short half life. This formulation as a solution in capsules gives rapid and complete absorption producing prompt induction of sleep

**Manufacturer** Montedison Pharmaceuticals Ltd, Kingmaker House, Station Road, Barnet, Herts

**Description** Green soft gelatin capsules containing temazepam 10mg in solution

**Indications** Treatment of sleep disturbances, particularly associated with anxiety and emotional stress

**Contraindications** Hypersensitivity to benzodiazepines

**Dosage** One to three capsules on retiring  
**Precautions** As with other drugs care should be taken in early pregnancy. Patients should be warned against driving or operating dangerous machinery if they have a hangover effect. There is some potentiation with alcohol

**Side effects** May produce morning headache, transient rashes and mild gastro-intestinal disturbances

**Packs** 30 and 100 capsules (£1.80 and £5 trade)

**Supply restrictions** PI S4B

**Issued** September 1977

## ADALAT capsules

Nifedipine is a potent calcium antagonist. Protects heart against excessive oxygen utilisation during physical activity. It has a direct cardiovascular action which does not cause sympathetic inhibition.

**Manufacturer** Bayer UK Ltd, Haywards Heath, West Sussex RH16 1TP

**Description** Orange soft gelatin capsules containing nifedipine 10mg in a yellow viscous liquid

**Indications** Treatment and prophylaxis of angina pectoris. Does not cause a rise in intraocular pressure and can be used in patients with glaucoma

**Contraindications** Not to be given to women of child-bearing potential

**Dosage** Recommended dose is one capsule three times daily before meals with a little fluid. Dose may be increased to two capsules three times daily. If immediate effect is required capsule should be bitten open and liquid contents allowed to remain in the mouth

**Precautions** May be used with beta-blocking drugs and other antihypertensive agents but there may be an additive effect resulting in postural hypotension. Care should be taken in patients with poor cardiac reserve. Diabetic patients may require adjustment in their control

**Side effects** Headache, flushing and lethargy may occur but usually disappear with continued treatment

**Storage** Protected from strong light in original container

**Packs** Foil packs of 100 capsules (£10.29 trade)

**Issued** October 1977

## TRIMOVATE cream and ointment

**Manufacturer** Glaxo Laboratories Ltd, Greenford, Middlesex

**Description** Cream is a yellow water-soluble cream containing clobetasone butyrate 0.05 per cent, nystatin 100,000 units per g and oxytetracycline 3 per cent. Ointment contains clobetasone butyrate 0.05 per cent nystatin 100,000 units per g and chlortetracycline 3 per cent in soft paraffin basis. Neither contains lanolin or parabens

**Indications** Treatment and management of steroid-responsive dermatoses with candida or bacterial infection, including infected eczemas, intertrigo, napkin rash, anogenital pruritus and seborrhoeic dermatitis

**Contraindications** Viral and dermatophyte diseases of the skin and tuberculous lesions

**Method of use** Apply to affected area up to four times a day. Suitable for infants, children and adults

**Precautions** Avoid long term administration in infants and children. Prolonged application to face undesirable. May cause slight staining of hair, skin or fabric but this can be removed by washing. To be stopped if hypersensitivity occurs.

**Side effects** Local atrophic changes could occur where moisture increases absorption of the steroid, but only after prolonged use

**Storage** Below 25°C

**Packs** 25g tubes (£1.78 trade)

**Supply restrictions** TSA

**Issued** September 1977

## ESTRACYT capsules

Estramustine is a chemical compound of oestradiol and nor-mustine with oestrogenic and cytotoxic activity. There is a low incidence of feminising side effects and little or no marrow depression. It has no immunosuppressant effect

**Manufacturer** Lundbeck Ltd, 48 Park Street, Luton LU1 3HS

**Description** Hard off-white capsules containing 140mg estramustine phosphate as the disodium salt

**Indications** Carcinoma of the prostate, especially in cases unresponsive to or relapsing after, treatment by conventional oestrogens or orchidectomy

**Contraindications** Peptic ulceration, severe liver or cardiac disease and moderate to severe marrow depression

**Dosage** Standard starting dose is four capsules daily with meals, later adjusting to three to six. Maintenance therapy may be two capsules daily. Dosage range, one to ten capsules daily

**Side effects** Gastrointestinal upset; rarely, transient disturbance of liver function,

thrombocytopenia, gynaecomastia; an allergy

**Storage** In a cold place (2° to 8°C)

**Packs** 100 capsules (£89.24 trade)

**Supply restrictions** Recommended prescription only, but supply to retail only for patients whose treatment has been initiated in hospital

**Issued** October 1, 1977

## CCNU Lundbeck capsules

**Manufacturer** Lundbeck Ltd, 48 Park Street, Luton LU1 3HS

**Description** Blue capsules containing lomustine 40mg

**Indications** Palliative or supplementary treatment, usually in combination with radiotherapy and/or surgery or as part of multiple drug regimens in brain or lung tumours, Hodgkin's disease or malignant melanoma

**Contraindications** Previous sensitivity to nitrosureas; severe bone marrow depression; and pregnancy

**Dosage** *Adults*—if CCNU is only chemotherapy, 120 to 130 mg per m<sup>2</sup> as a single dose every 6 to 8 weeks. Dosage to be reduced if given as part of drug regimen or in the presence of leucopenia or thrombocytopenia *Children*—administration to children with malignancies other than brain tumours should be restricted to specialised centres and exceptional situations. Dosage as in adults

**Precautions** Blood counts to be carried about before and at frequent intervals during treatment

**Side effects** Marrow toxicity of delayed or prolonged nature. Nausea and vomiting occur four to six hours after a dose and last for 24 to 48 hours followed by anorexia for two to three days. Loss of scalp hair has been reported infrequently

**Storage** Protected from light and moisture in original container

**Packs** 50 capsules (£37.50 trade)

**Supply restrictions** Restricted to centres with special experience in chemotherapy of malignant disease. On prescription only

**Issued** October 1, 1977

# on TV next week

Ln—London; M—Midlands; Lc—Lancashire; Y—Yorkshire; Sc—Scotland; WW—Wales and West; So—South; NE—North-east; A—Anglia; U—Ulster; We—Westward; B—Border; G—Grampian; E—Eireann; CI—Channel Island

**Anadin:** All areas

**Aspro clear:** All except E

**Farley's rusks:** A, U, We, B

**Imperial Leather soap:** All except G, E, CI

**Maxi Make-Up:** All except E

**Nomor grey:** All except Ln, M, Lc, Y, CI

**Philishave:** All areas

**Vitarich:** Lc

**Vosene shampoo:** All except E



# Trade News

## Nulon pump offer

The dispensing pumps which were introduced as in-store promotion aids for the launched Nulon hand cream are now being offered to consumers by Reckitt Dilek Products, Reckitt House, Onefeerry Road, Hull HU8 8DD. Special collarettes attached to Nulon bottles are promoting the offer and have to be used in by the consumer and returned to Reckitt. The pump will fit both 150 and 300ml bottles and turns them into handy dispensers making the use of Nulon much more convenient both on the dressing table and by the kitchen sink. Bonus terms are being offered to the trade for the selling-in period from the beginning of this month, and a shelf talker is also available, says the company.

## Remington's boost shavers

Remington Consumer Products, Apex Tower, High Street, New Malden, Surrey KT3 4DL, are boosting their electric shavers for Christmas. Their M3 "tri-action" shavers will be backed with television advertising through November and December and double page spreads from now until Christmas in *Readers Digest*, *Sunday Times magazine*, *Observer magazine*, *Playboy* and *Mayfair*.

## Spicy lemon Airbal

A new fragrance refill, spicy lemon, has been introduced by Smith & Nephew Ltd, Bessemer Road, Welwyn Garden City, Herts, for their Airbal dome. Like the existing natural and floral refills, spicy lemon contains a mixture of natural ingredients, says the company, including lemon, cinnamon, thyme and coriander. The refills (£0.32) last for up to eight weeks, or longer if the dome is adjusted.

## Chap Stick radio support

During December 1977 and January 1978 H. Robins Co Ltd, Redkirk Way, Horsham, West Sussex, are advertising Chap Stick lip protector on the following commercial radio stations: Capital, Clyde, Millam (Sheffield), Pennine (Bradford) and Piccadilly (Manchester). There will also be a new display unit available for the winter, containing 144 tubes of Chap Stick, in addition to the existing 24 tube and 72 tube units.

## Immell looks gold

Immell International Ltd, 17 Cavendish Square, London W1M 0HE, feel that gold is an asset from anybody's standpoint and that gold cosmetics are no exception.

They have therefore introduced gold shades to many of their cosmetics for the forthcoming Christmas party season. Pressed eye shadow (£0.28) will be available in gold, gold on lime and gold on hyacinth. It will also be available in silver. A gold eye shadow stick (£0.26) will also be on sale, and in frosted silver and frosted bronze. Russett in gold, ruby in gold and coral in gold are the new colours for lips and nails.

## Fennings news

Fennings Pharmaceuticals, 86 Hurst Road, Horsham, West Sussex, RH12 2DT, are offering a bonus on Little Healers of fourteen for twelve for a minimum order of two dozen. The offer runs until the end of October and applies to all three pack sizes.

*Continued on p474*



# Q

*Why have Denclen sales doubled since 1975?*

# A

1. Consistently heavy advertising throughout the year.
2. Heavy promotion to the dental profession all year round.
3. Simple to use-just squeeze, brush and rinse.
4. Two sizes-to suit most budgets.

# Q

*Where you ordered 1 doz. Denclen in 1975, do you now order 2 doz? Or do your stocks run out before you re-order?*

# DENCLEN

International Laboratories Ltd. — the chemists' friend.



**There are  
laxatives —  
and  
laxatives —  
and**

**NYLAX**

**THE MODERN  
VITAMIN AND  
HERBAL  
LAXATIVE...**

*which has increased its sales every month (on a travelling average) for the last 10 years. BCP are putting the returns back into more advertising. To continue the cycle of sales, and participate in these automatic profits*

**ALL YOU NEED TO  
DO IS KEEP NYLAX  
IN STOCK... it sells  
steadily.**

**NYLAX**

*retails at 26p for 30 tablets  
so it is good value that  
everyone can afford.*

*Direct from  
British Chemotheutic Products  
Limited., (Makers of Optabs)  
Kemtheutic House, Grant Street,  
Bradford, West Yorks.  
£2.17 doz.*

*Telephone:  
Bradford (0274) 22005*

*Or order singles through your  
usual wholesaler.*

## Trade News

*Continued from p473*

### Combi-pack of Gyno-Daktarin

Janssen Pharmaceuticals, Chapel Street, Marlow, Bucks, have introduced a Gyno-Daktarin Combi-pack (£4.70) comprising 14 pessaries each containing miconazole 100mg plus 15g miconazole cream 2 per cent. The pack is designed to provide a treatment course for vaginal thrush.

### Cordilox and Harmony changes

New film coated orange Cordilox 40mg tablets are to replace existing yellow sugar coated tablets, say Abbott Laboratories Ltd, Queenborough, Kent. Pharmacists should use the yellow tablets until stocks are finished. Abbott also say that 1,000 packs of Harmony tablets are now discontinued, but 100 packs are still available.

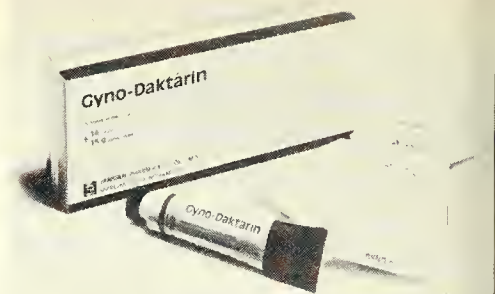
### Comic leaflet for oral hygiene

Nicholas Laboratories Ltd, 225 Bath Road, Slough, Berks SL1 4AU, have produced a comic-style leaflet aimed at encouraging oral hygiene amongst children. The leaflet, which depicts a friendly dentist who explains what he is doing at each stage, is also aimed at making the visit to the dentist less of an ordeal. The leaflet will be primarily distributed to dentist but interested pharmacists may obtain supplies from Nicholas representatives or the company.

### Denim's extras

Elida Gibbs Ltd, PO Box 1DY, Portman Square, London W1, have made "Denim's extras" available to all Boots stores while stocks last. There is 25 per cent extra in packs of Denim talc, anti-perspirant deodorant, shaving foam and hair control at regular Denim prices.

Christmas packs of Denim products are



also available now in six combinations from £1.80 (after shave and talc) to £3.90 (after shave, talc, anti perspirant deodorant and soap).

### Winarick distribute Liberty

Winarick (UK) Ltd, Unit 15, Heywood Industrial Estate, Heywood, Lancs OL1 2RQ, are now distributing the Liberty fragrance collection under their Tange label. The collection comprises Musk Georgie, Burnt Almond, Sandalwood and Freesia fragrances.

### Unichem's twenty bargains

Unichem Ltd, Crown House, Morden Surrey, who say that their twelve region branches have been working "flat out" to keep pace with the product demand created by the current "Spot the Savings" and poster promotions, have selected a group of twenty "bargain buys" for offer from October 17 to 28. The bargains are:—Alberto balsam conditioner, Andal, Atrix, Badedas, Brut 33 Splash Conditioner, Colgate Dental Cream Standard, Disprin, Doans Pills, Elastoplast Airstrip, large stretch fabric large, Fastidia, Gillette GII cartridges, Johnson's baby lotion and baby powder, Kotex Simplicity, Lillet Mum Rollette, Pearl Drops, Signal, Sun silk hairspray and Tender Touch economy roll.

### 2nd Debut distribution

Dendron Ltd are no longer handling the distribution of 2nd Debut moisturising products. With effect from October 1 sales and distribution will be handled by Beecham Proprietaries, Beecham House, Brentford, Middlesex. All inquiries should be addressed to Mr J. E. Hutton, general sales office manager.



THE Denim packs available to Boots containing 25 per cent extra talc, deodorant, shaving foam and hair control



# Free!

Order two dozen Fennings Little Healers now and we'll give you fourteen for each dozen.

Fennings Little Healers are tiny tablets which can ease big coughs and they will be selling fast this winter.



They come in three sizes — packets of 12 tablets and convenient plastic tubes of 36 (as illustrated) and 90. Buy any size(s) in multiples of two dozen to qualify for this special bonus. But hurry, the offer only lasts for a month and orders must be sent off to us by October 31st, 1977.

Send in the reply paid card below and at the same time, put in your orders for other products in the Fennings range which are shown overleaf (at normal prices).

Name.....

Address.....

**BONUS OFFER.** I will pay for ..... doz. Fennings Little Healers (12's) £0.97 per doz.  
..... doz. Fennings Little Healers (36's) £2.18 per doz.  
..... doz. Fennings Little Healers (90's) £4.20 per doz.

and receive the bonus as stated (minimum order two dozen).

**OTHER GOODS.** Please supply the following items on your normal terms :

.....  
.....  
.....

Please charge to my account ☐

Please charge through my wholesaler ☐

Name of Wholesaler .....

Address .....



# More in the Fennings range



**Fennings Gripe Mixture.** Relieves wind, hiccups and tummy upsets quickly and safely. In 150ml bottles. Per dozen bottles £2.18.

**Fennings Baby Shampoo.** Keeps hair glossy, soft and healthy. Its non-irritant action makes it ideal for the most sensitive skin. 110cc plastic bottles. Per dozen bottles £3.50.

**Fennings Adult Cooling Powders.** Relief from feverish colds and headaches. In 12 and 36 powder packs. Per dozen 12 powder packs £1.87.

**Fennings Mixture (Lemon Flavoured).** Relieves colds and 'flu and is also recommended for rheumatic pains. In 200ml bottles. Per dozen bottle £3.50.

**Congreves Balsamic Elixir.** Distributed exclusively by Fennings. A highly concentrated preparation for the relief of coughs that come with bronchitis and heavy colds. In small, medium and large bottles. Per dozen medium bottles £5.68.

**Fennings Original Mixture.** Stomachic and astringent in 200ml bottles. Per dozen bottles £3.19.



**Fennings Soluble Junior Aspirin.** Now in amber coloured plastic bottles with the new 'Snap Safe' child resistant cap. 25 tablets per bottle. Per dozen bottles £1.40.

## Fennings Childrens Cooling Tablets and Powders.

For the relief of teething and mild feverish conditions. Tablets are soluble and pleasant to take and based on the same formula as Powders. Both contain Paracetamol. Per box of 20 packs of 15 tablets per pack £2.59. Per dozen boxes of 20 powders £2.80.

All prices shown are wholesale on which V.A.T. at 8% is charged. Prices effective until October 31st, 1977. For recommended retail prices, please apply direct to Fennings Pharmaceuticals.

To order :— Please complete Order Form overleaf.

## Fennings

Fennings Pharmaceuticals, 86 Hurst Road, Horsham, West Sussex RH12 2DT  
Telephone Horsham (0403) 3427

Postage  
will be  
paid by  
licensee

Do not affix Postage Stamps if posted in  
Gt. Britain, Channel Islands or N. Ireland

BUSINESS REPLY SERVICE  
LICENCE NO. CN13

**Fennings Pharmaceuticals**  
**86 Hurst Road**  
**Horsham, Sussex**

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The new Radox Herbal Bath packs have a four colour design to maximise shelf recognition and the caps are colour coded to identify each of the three fragrances.

### Radox herbal reformulated

New Radox herbal bath has been reformulated to produce a thicker, richer and more concentrated product which will offer the housewife up to 20 per cent more baths from the same size packs, say Nicholas Laboratories Ltd, 225 Bath Road, Slough, Berks. The price remains the same and the new packs have been made with different motifs and coloured caps for each fragrance to increase identification. Nicholas are to spend over £500,000 through television and women's press over the next nine months with the first national TV burst beginning on October 24.

### Lancome's harvest colours

For the autumn season Lancome (England) Ltd, 14 Grosvenor Street, London W1X 0AD, are offering customers a "golden harvest—a bumper crop of rich colours". Bronze d'or and amber d'or are the golden glow colours for lips (£1.15), a velvet and gold double ended crayon (£1.45) to highlight the eyes and groseille, bruyere, sequoia or sienne for nails (£0.95). Lancome's "golds for autumn" will be available for sale from October.

The company also handle Fidji by Parfums Guy Laroche who are relaunching the Douceline bath range under a new name and with new streamlined packaging. The range is now called Fidji pour le bain and including a moisturising foam bath, bath oil, bubble milk bath, dusting powder and body lotion.

### Rimmel advertising

Rimmel International Ltd, 17 Cavendish Square, London W1M 0HE, are continuing their full colour advertising campaign in the women's Press during the months up to December.

### Revlon spice shades

Revlon International Corporation, 86 Brook Street, London W1, have added three new shades of brown, rust and plum into their moisture cream lipstick (£1.10) and cream nail enamel (£1.00) to create their "autumn look." The colours are cherry pepper, rich pimento and spiced plum. Available for sale from mid-month.

Ultima II from Charles Revson have

introduced golden highlight colours into their ranges for the autumn collection—golden glory shine in super luscious lipstick (£2.15) and couleur extraordinaire nail colour (£1.75), and golden glory highlighter for cheeks and eye (blushing creme £3.00 and eyeshadow £3.40). Tapestry red, royal russet and fleur de plum are additional shades for the lipstick, nail colour and blushing cream and royal fawn, russet richesse and Flemish mauve in the eyeshadow.

### Givenchy Christmas pack

Parfums Givenchy's drum-shaped gift presentation for Givenchy III eau de toilette proved extremely successful last year. Parfums Givenchy Ltd, Riverdene Industrial Estate, Molesey Road, Hersham, Walton-on-Thames, Surrey, have therefore decided to adopt a similar theme this year, but have changed and improved the design. The new presentation (£4.95) has a moulded inset, flopped in dark brown, which holds the 2 oz atomiser bottle firmly in place. The drum-shaped outer is in platinum, gold and milk brown livery, with four vertical strips of gold forming illusory "corners".

### Cussons repeat commercials

The "butter" and "aeroplane" television advertisements for Imperial leather soap are being repeated by Cussons Sons & Co Ltd, Kersal Vale, Manchester M7 0GL.

### Orlane's diamond shades

Jean D'Albret-Orlane Ltd, 125 High Holborn, London WC1V 6QX, have added four new shades to their ranges for the autumn—their theme for the season's look is the vivacity and sparkle of diamonds, in accordance they say with the couturiers' decree that women will be lavishly jewelled and wearing sumptuous clothes. The colours for the lipsticks (£2.10) and nails (£1.95) are diamant rouge and diamant rose and for the eye shaders (£4.40) diamant vert and diamant gris. Available for sale from October 1.

### Bonus offer

A 10 per cent bonus will be available on all orders for Earex ear drops placed during October with local wholesalers or Ernest Jackson & Co Ltd, Crediton, Devon.

## Shopfitting and Equipment

### DIY shopfitting special offer

Two free checkouts, greeting card units or joinery to equivalent value is offered, for a limited period, to buyers of £1,200 worth of Shopkit system. According to Shopkit, 50 Ivatt Way, Peterborough PE3 7PN, one of their do-it-yourself installations costing £1,740 would have cost £2,941, £3,435 and £5,268 respectively from three other leading manufacturers. The company operates a "return of post quotation" system, and offers lunch to Sunday visitors at the Peterborough showroom, by prior arrangement.

### Triangular security mirror

A convex triangular mirror (£22.50 ex VAT) provides maximum vision in a confined area, according to Tom Drake Associates Ltd, 7 High Street, Ewell, Surrey. A conventional circular mirror focusses partly on the ceiling whereas the triangle focusses where required and is intended mainly for the checkout and cash point, the suppliers say.

### Burglar alarm

Photain Controls Ltd, Unit 18, Hangar 3, The Aerodrome, Ford, Arundel, West Sussex, have produced a burglar alarm kit (£52 ex VAT) which can be installed by a do-it-yourself enthusiast. Installation instructions and wiring diagrams are provided and the kit carries a "money back guarantee".

### Label dispensers

Limpet label dispensers are available in two models LP4 for 4in tapes (£10.50 ex VAT) and LP6 for 6in tapes (£11.95 ex VAT). Limpet Tapes Ltd, 8 Hatcham Park Road, London SE14 5QD, claim a saving of 75 per cent over conventional methods of protecting and attaching labels. They may be wall or bench mounted.





# To those chemists who stock Foster Grants, a word of thanks.

Three years ago, nobody had heard of Foster Grant sunglasses. Today, they're the most successful brand on the market.

And it's all thanks to you. To show our gratitude, we've something very special in store for next year.

Our largest, most stylish range ever. As well as polarised lenses, we'll have lots of gradients and "sunsitives."

As usual we're well ahead of current trends by putting the emphasis on plastic frames.

Those of you who've been with us since we launched on a £100,000 budget can well imagine what'll happen next year when we spend over half a million pounds on advertising.

Finally you'll be getting one of our new display stands. Not only is it pre-loaded, it's also illuminated. After all you've done for us, it's the least we can do for you.

## **Foster Grants.**

We've got the looks, the lens... and the sales.





# To those who don't, a word of advice.

You're obviously stocking a rival brand of sunglasses. By doing so, you're missing an opportunity.

Here's why:

Next year, the Foster Grant range will be the biggest, most fashionable yet. As well as polarised lenses, we'll have gradients and 'sunsitives', with the emphasis on plastic frames.

Foster Grant advertising has consistently been better liked and better remembered than any of the competition's. Next year we're spending over £1½m.

And next year, Foster Grant will be offering all their retailers one of the new display stands, which are not only pre-loaded, but illuminated as well.

Which means that Foster Grant are almost certain to be the best selling, most consistently profitable brand of sunglasses of 1978. And if you're still not stocking them, don't say we didn't warn you.

## **Foster Grants.**

We've got the looks, the lens...and the sales.





# Blushers considered only real growth area

The only product within the skin make-up market which has shown any real volume growth in recent years is that of blushers and shaders, according to the second part of the special report on cosmetics by the Economist Intelligence Unit Ltd, published in the September issue of *Retail Business*. They acknowledge the Cosmetics and Toiletries Survey 1976 published by IPC Magazines Ltd, as their main source. The skin make-up market itself, which they define as including foundations, all-in-one make-ups (ie foundations and powder combined), rouges, blushers and shaders is estimated to have been worth £23m in 1976.

The price range for foundations and all-in-one make-ups is tremendous, from £0.30 to £10 at least. The size of the market is difficult to estimate because of the frequent use of general purpose creams such as Nivea Creme as a foundation, but is put at a little under £10m at rsp, of which all-in-one make-ups account for about one third. Total usage has remained constant since 1973, it shows a sharp increase between teenagers and older women, but is even from 25 years onwards. The leading brand, Max Factor, lost a few users in 1976 but overall the

situation has remained reasonably static since 1973. In the table of distribution which relates to a question in the IPC survey asking where the product was last bought, Boots come out on top with 33 per cent, "other chemists" claimed 21 per cent, department stores 18 per cent and direct sale 20 per cent. Cosmetics margins for retailers usually represent at least 33½ per cent of the retail price or 50 per cent of the buying price as opposed to toiletries for which the margins are lower, at around 30 per cent of the rsp.

## Face powders

By the 1920's face powder had come to be accepted by most people. Up to the mid-sixties its use continued but after 1967 it began a downward trend and by 1976 only four out of 10 women were using it. This can be attributed first of all to the advent of the all-in-one make-up and then to the fact that the current fashion no longer demands a matt face and consequently fewer women, particularly the younger generation, regard facial make up as an integral part of their beauty routine.

In spite of heavy price increases the market value has dropped from £11m at rsp in 1971 to about £10m in 1976, this

has to be balanced against the fact that because face powder is used more by the older women there is a trend toward more expensive products—also most of that £10m is accounted for by compressed powder, loose powder probably only accounts for about £1m. Brand trends have remained fairly static since 1973. Max Factor and Yardley are top in the league table now as then. The distribution pattern for face powder differs slightly from that for foundations and all-in-one make-up—more face powder is obtained from chemists (Boots 38 per cent, "others" 22 per cent) and direct selling is lower.

Rouges, blushers and shaders basically serve the same purpose that of putting colour on the face, but there are some fine differences. The consistency of blushers is rather different from that of the rouges, tending to be used with more subtlety. At the moment this sector is considered a significant growth area—the market size for 1976 is estimated to have been £3m at rsp. Main brands are Boots, Rimmel, Avon, Max Factor, Outdoor Girl and Miners. Half the women in Britain between the ages of 16 and 24 use some form of this product and half again use them regularly at least once a day. Differences are more apparent however in the age groups using the various types of product—blushers are used evenly by all women until the age 45-54 age group when a dramatic swing to the use of rouges is indicated. Chemist outlets, although they dominate distribution, are not used for rouges and blushers to the same extent as for other facial cosmetics, while department stores are increasing in importance.

## Chemist trade depressed

Many areas of the chemists goods trade in 1976, when prices are taken into consideration, will present a depressing picture, says the Economist Intelligence Unit Ltd, in the September issue of *Retail Business*. Part of the explanation may be that cut-price competition (eg from drug-stores) has lowered the returns in the toiletries sector. Also the evidence available from preliminary data concerning the average household expenditure in these markets suggests that "the opposing pressures of the summer heatwave and reduced available income combined to hold the total figures nearer to the share held in the previous year than expected".

Perhaps the most striking aspect of the figures for 1976 showing the value of selected products in the chemists and household figures (sources, Business Monitors and Department of Industry) is how accurately they reflect that exceptional weather of that summer. Above average performers were headed by the group of creams and lotions which include sun filters etc, but also contained analgesics because many people found that the heat, especially for those at work, produced headaches. Men's toiletries also

showed a real increase probably, they say, due to the increased bathing and showering, as did the general Cologne/toilet waters section. Other beneficiaries were depilatories and even household deodorisers. Less obvious was the increase in carpet shampoos.

The products which showed the most marked decline when price trends are allowed for were patent and proprietary foods and food drinks, and the declining birth rate in 1976 is also thought to have

influenced the market by bringing down the talc and baby powder market.

Employment figures for the toilet preparations industry which showed a drop in 1975, increased in the third and fourth quarter of 1976 suggesting an upturn may be developing. The markets for dental preparations including toothpaste, and most forms of facial and hand creams and lotions rose by so little that when price changes are taken into consideration they actually represent a decline.

The latest poster for Durex has been accepted by London Transport for display on the underground despite objections from Dr Rhodes Boyson MP. Dr Boyson is not taking his complaint up with the Advertising Standards Association



The small family car



**Next year,  
there'll be even more of  
the usual dazzling array.**









# But still only one brand leader

We're No.1 in sunglasses. And, for our money, that's the way it's going to stay.

You see, we didn't get where we are on looks alone.

(Not that we don't have a fashionable range. In fact, we have 68 styles in 111 colour and tint variations, with graduals and a new sports collection.)

But the secret of our success is we'd never compromise your customers' eyesight for trendiness.

7 layers go into the making of a Polaroid lens. Result: a lens that eliminates up to 99% of horizontally reflected glare, 96% of ultraviolet radiation.

It's scratch-resistant and up to 2½ times harder than ordinary plastic lenses.

We take much the same care over our frames.

Of course, we could do things differently, saving money here and there. Except that a wrong lens or a weak frame reflects on your good name as well as ours.

That's why more people trust the Polaroid tag than any other.

So start off by ordering pre-packs from your Polaroid distributor before December 31st and take advantage of our Early Bird offer.

But don't leave it too long. Next year we're supporting our sunglasses (and you) with over £700,000 worth of advertising.

Already, Polaroid has twice as high awareness as any other sunglass brand. Next season, it will be the most highly promoted name on television as well.

After all, isn't that what being brand leader's all about? Leading?

## POLAROID SUNGLASSES







# It's 'Fiesta

**ARE YOU JOINING  
IN OUR EXCITING**

**At Uni**

**SPOT-TH**

**A  
Ford Fiesta**



**FOR YOUR  
CUSTOMERS**

**Plus £2000 In Runner-Up Prizes:**

**5 Sony Portable Colour TVs**

**500 £2 Shopping Vouchers**

(Redemable  
only at your sh



**NATIONAL ADVERTISING  
BREAKS 5th OCTOBER**

***A UniChem Promotion  
Aimed at Bringing More Business  
to the Independent***



# a' Time

## hem!

# SAVINGS

**CONSUMER  
COMPETITION?**

**A  
Ford Fiesta**



**FOR YOU**

Yes-There's a Fiesta for the Pharmacist  
Whose Customer Wins First Prize

To: J.A.L. SPELLER,  
General Sales Manager,  
UniChem Ltd., Crown House,  
Morden, Surrey.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

DATE \_\_\_\_\_

*I am an Independent Retail Pharmacist and  
would like further information about your  
'Spot-The-Savings' Consumer Competition.*



# The right lines The right quantities The right prices

**- A STOCK CONTROL SYSTEM THAT MAKES BUSINESS SENSE.**

Control your stock properly and you will lay a solid foundation for efficient profit-conscious retailing.

Vestric Vantage Automatic Stock Control is a computer-based system which answers the important questions for you — **when to order and how much to order.**

We place at your disposal one of the largest ICL computer installations in Europe to help you satisfy the needs of **your** customers for both ethicals and O.T.C.s.

Automatic Stock Control regulates stock holding, increases stock turn and releases capital tied up in wasteful overstocking



Vantage members also benefit from a Tape-Ordering System which is free of charge and is more convenient than conventional ordering methods.

In short, Automatic Stock Control makes sure you stock just the lines your customers want, at the times they want them, and at prices to attract them.

And you cannot run a business better than that.

Stock-checking is simple — a tick or a dash in the special Stock Review Book

Tape-ordering — just dictate your order into the cassette recorder provided and hand the cassette to your Vestric delivery driver.

Telephone sales staff also are available to help you with your order.



If you would like to know more about the Vantage Programme, please contact your local Vestric branch manager or chemist representative.

**Vestric**  
**VANTAGE** \*

MANAGEMENT SYSTEMS FOR THE PROFESSIONAL RETAILER



# Financing of pharmacy within the NHS

by Mr R. Gartside, BSc, MPS

It is fatally easy to concentrate on detail and overlook the broad general picture, being, as it were, unable to see the wood for the trees. To try to perhaps bring some perspective to the present debate on retail pharmacist's remuneration, I have abstracted figures from the annual reports of the Ministry/Department of Health, as given by Mr I. F. Jones of the pharmacy practice research unit, University of Bradford, in an address to the Lincoln branch of the Pharmaceutical Society in 1974. The figures thus do not cover the present period of high inflation, and I would stress that the treatment of them and any conclusions drawn are entirely my own.

The table (p487) shows the overall picture and it will be seen that the total cost of the retail pharmaceutical service has remained remarkably constant at about 10 per cent of the total cost of the Health Service. Indeed, this is a point which has often been stressed by the pharmaceutical industry when defending itself against charges of profiteering. However, the total cost has only remained a constant proportion of NHS expenditure while ingredient costs have risen steadily because retail pharmacists' dispensing gross profit margin has just as steadily been eroded. As the costs of drugs has gone up, so has the percentage gross profit margin on dispensing gone down, the one almost exactly in step with the other so that the total cost, as a percentage of total NHS cost, has remained the same.

## Professional fees zero by 1999

This is perhaps better appreciated from the accompanying graphs, where the red lines show year to year figures, while the black lines show the mathematically calculated overall trend lines. It is of more than passing interest to note that if these overall trends continue, then on-cost and professional fees will become zero in May 1999, while the trend line forecasts that by June 1977, on-cost and professional fees would be equivalent to a gross profit on return of 18.93 per cent. This latter figure is in very fair agreement with current reality, and while it is gratifying to find that the forward projection appears correct for 1977, the implications are less encouraging for one who does not expect to retire until the year 2001!

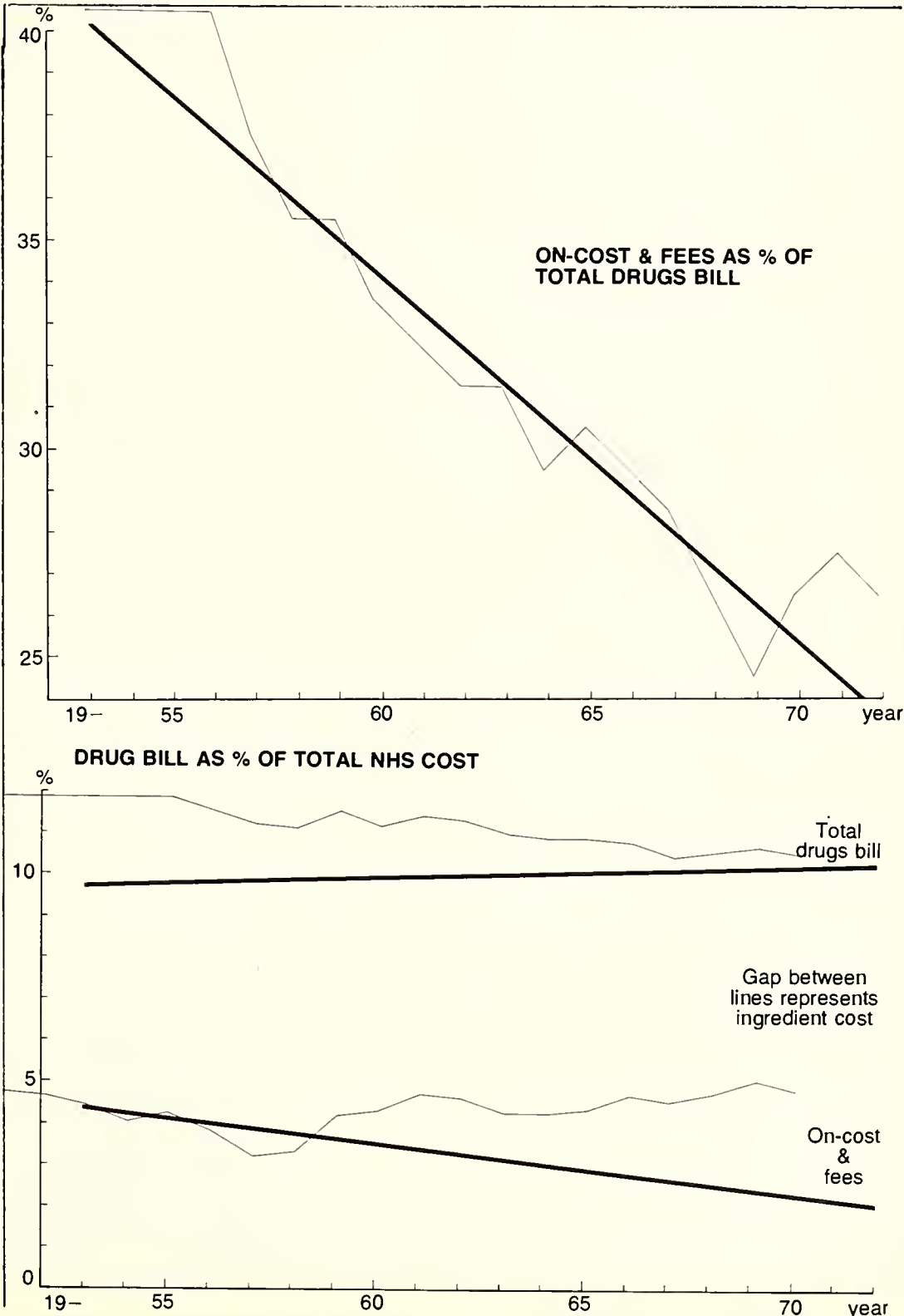
More seriously, the important question is whether the gradual but inexorable decline in profitability is a conscious policy on the part of the Department of Health, or whether it is the result of efforts to control the total drugs bill, the only part

of which that is amenable to control being the on-cost and dispensing fees. The second is probably the more likely since it fits the hypothesis that the Health Service is administered but not managed. The sacred apportionment of expenditure scribed on tablets of stone in 1947 (actually merely inherited from the previous hotch-potch) must be preserved intact for all time. Thus more is spent in some areas of the country on, for example, maternity

services because that was how it was in the beginning and shall be evermore.

The drugs bill started at 10 per cent of total NHS expenditure and that is its allotted slice of the cake. Never mind if the drugs of 1977 are vastly more expensive than those of 1947—simply cut retail pharmacists' remuneration to keep the proportions of expenditure constant. Alter the proportions of overall expenditure and eminent professors will write to *The Times*, questions will be asked in the house, and we shall have all over again the pantomime of indignation over the unrestricted dragons of private enterprise. For people will not understand that there is not one single rate of inflation, but different rates in different spheres of economic activity. It is retail pharmacy's tragedy that the rate of inflation of script ingredient costs has for the last quarter century been three times that of the retail

*Continued on p487*





# WINTER!

**'Tyrozets' – a winning line  
for winter throats**

When your customers come looking for relief from their mild sore throats and mouth irritations, 'Tyrozets' are a winning line – mild, pleasant tasting, and very effective.

To really win this winter, make sure you get all details of the 'Tyrozets' Autumn/Winter Bonus Offer, and stock up now.

## TYROZETS<sup>®</sup>

a 'pharmacy-only' product



Each 'Tyrozets' lozenge contains 1mg tyrothricin and 5 mg benzocaine BP. Detailed information is available on request.

® denotes registered trademark.

Merck Sharp & Dohme Limited, Hoddesdon, Hertfordshire EN11 9BU  
Telephone Hoddesdon 67272



Overall finances of retail pharmacy within the NHS  
NB Number of retail pharmacies rose pre-1956, but then began to decline, perhaps in line with declining profitability.

Year	53	55	57	59	61	63	65	67	69	70	71	72
Total cost of NHS £m.	548	607	721	828	981	1,092	1,308	1,594	1,823	2,083	2,369	2,732
Total cost of retail pharmaceutical service £m.	52.06	58.27	69.94	83.63	96.14	110.29	145.18	168.96	189.59	208.30	232.16	265.00
Ingredient cost of pharmaceutical service £m.	31.13	35.03	44.30	54.68	65.60	75.75	101.68	122.07	142.55	153.46	169.65	194.92
On-cost and professional fees £m.	20.93	23.24	25.64	28.95	30.54	34.54	43.50	46.89	47.04	54.84	62.51	70.08
Total cost of retail pharmaceutical service as % of total NHS cost	9.5	9.6	9.7	10.1	9.8	10.1	11.1	10.6	10.4	10.0	9.8	9.7
On-cost & fees as % of total NHS cost	3.8	3.8	3.6	3.5	3.1	3.2	3.3	2.9	2.6	2.6	2.6	2.6
On-cost & fees as % of retail pharmaceutical service cost	40	40	37	35	32	31	30	28	24	26	27	26

# Pharmacy finance

Continued from p485

price index. As a result, a falling percentage gross profit margin has not greatly adversely affected individual living standards but has gradually and almost imperceptibly undermined the financial viability of the business itself, with the result that the bewildered owner one day finds that he cannot sell the business that has provided him with quite a good living. He cannot sell because nobody can afford to buy, the gross profit being insufficient to finance the loan needed to buy the stock. Gradually over the years, eleven weeks dispensing stock has crept up from 25 per

cent of annual dispensing gross profit to almost 75 per cent. Pharmacies close because they cannot be bought.

More recently the situation has worsened, as we all know. Dispensing gross profit is now insufficient to finance stock replacement, and it is possible that pharmacies will soon begin to close simply because they have run out of stock.

The perceptive will have noted that throughout this article there has been no mention of notional salary, return on capital, practice allowance, container costs, premises costs, overheads, or any other of the multitude of trees which prevent us from seeing the woods. This is quite deliberate. If the return on turnover were sufficient, all of the other items would auto-

matically sort themselves out . . . making 50 per cent on-cost you would not worry about the cost of bottles!

The problem facing us is essentially political. Simply how do we convince those without business experience that an adequate return on turnover is essential to our survival?

## 'Which?' repeats advice on moisturisers

The latest *Which?* report on moisturisers concludes that whatever advertisements may say or imply no moisturiser will stop skin wrinkling as it grows older.

Following their report on moisturisers in January 1976, the September issue of *Which?* magazine, published by the Consumer Association, looked at the problems of advertising moisturisers. In January the magazine had concluded that moisturisers help soften and smooth the surface of the skin "at least for a limited time" but that they do not nourish it nor stop skin wrinkling through ageing. The advice therefore was "choose the cheapest whose scent and feel suits you".

### Advertisers

Advertisers of moisturisers have an uphill task, *Which?* feels, in that they have to cope with the voluntary Code of Advertising Practice which states that cosmetic advertisements should not "contain any claim or implication that any preparation will promote rejuvenation of the skin or muscles and that hormones or vitamins remove or delay the formation of wrinkles" or that "proteins in cosmetics offer any nutritative benefits or that vitamins are in any way beneficial to normal healthy skin".

In 1976 about £3½ million was spent on advertising moisturisers, mostly in magazines and most of it aimed at women aged between 35 and 45. *Which?* looked at a number of advertisements and found that the fact "lurking behind the pseudo-scientific jargon is that all moisturisers seem to have the same limited success", that "help" was the "weasel word" which keeps most advertisers out of trouble—moisturisers *help* to keep skin moist, supple or smooth—and that some of the advertisements contravene the spirit of the code by implying that the products can make you look younger.

# Glaucoma and sunglasses

Part of a recent glaucoma and sunglasses feature (September 10 p355) was misprinted possibly making it difficult to follow. In summary, the arguments pointing out the dangers of wearing sunglasses were stated as usually thought to be confined to injuries resulting from an accident. Toughened glass and plastics are therefore superior to ordinary glass but tinted glasses and certain frames can obscure vision especially when driving. At an international conference organised by Polaroid (UK) Ltd last year a suggestion was made that sunglasses might precipitate attacks of angle closure glaucoma in vulnerable subjects. J. B. Davey and Dr G. A. Hopkins, City University, argue against this suggestion.

At first thought, the threat seems logical enough. When the eye is exposed to high levels of illumination the pupil of the eye contracts. When light levels are low the pupil dilates. It is well known that persons prone to attacks of angle closure glaucoma are more likely to have them when the pupil is dilated, as it will be during the evening or at night. It is also known that sunglasses, if sufficiently dark may, in very bright sunshine cause a contracted pupil to dilate slightly, at least for a period. Therefore, so the argument runs, a person who is potentially glaucomatous should not wear sunspectacles in case this precipitates an attack of angle-closure glaucoma by causing the iris to "bunch" into the angle and so impede the outflow of aqueous humour. So, as glaucoma is a disease of the mid-aged and elderly, it may be unwise to allow sunspectacles.

But before pharmacists become unduly alarmed and consider the advisability of putting up age resisting notices above sunglass displays, it would be well to examine the levels of illumination that are involved. A sunspectacle lens transmits about a quarter of the light that reaches it. Rather more than this falls on the eye because spectacles, unlike goggles, are not all-enclosing. When one walks into a building that is especially designed to be lit by daylight, such as some schools have been, the light level is reduced to one or two per cent of what it is outside. At night the indoor levels of illumination are of a lower order still, compared with daylight levels. If these situations have not already provoked an attack of angle closure glaucoma it would seem unlikely that the reduction of illumination by putting on sunglasses out of doors to a level that is probably 20 times higher than the level of illumination that they tolerate every time they walk into their own home, can be considered a hazard.

However any pharmacist who feels uneasy about selling sunglasses to senile clients should also consider the corollary. To be consistent, the level of artificial illumination inside their premises ought also to be raised several fold in order that, on a sunny summer day, the public entering will not experience a drop in illumination levels to less than a quarter of that in the street outside. The illuminating engineers could manage it, but there might be problems getting rid of the resultant heat!



# YOU KNOW WHAT YOU



A brand leader. One that works at staying at No. 1.

That gives better value for money.

That changes with the times.

That spends more.

That appears regularly in Press and T V.

And, that, above all, turns in a healthy profit.

Radox created the liquid segment of the bath additive market 7 years ago. And we've been Brand Leader ever since.

Despite all the efforts of the competition, the Radox share of the market is still 3 times bigger than its nearest, generally available, competitor.

## NEW FORMULA

**MORE  
CONCENTRATED**  
*More baths for your money*

Now, we've reformulated Radox Herbal Bath to be even richer and more concentrated.

So your customers will be getting more baths for their money, and even better value.

## NEW LOOK RADOX

We've redesigned the 280 and 500ml packs for greater shelf impact. And added coloured caps so that all three fragrances stand out in a crowd.



# NOW YOU NEED

The only thing that hasn't changed is the all-family appeal.

And there will be special eye-catching gift packaging for Christmas, too.

## WE'RE SPENDING NEARLY £500,000 ON ADVERTISING

To promote new Radox Herbal Bath we intend to spend more on advertising than anyone else in the market.

We know you don't stay on top by resting on your laurels.

## A NEW RADOX COMMERCIAL



## £350,000 on TV

We've made a new 30 second commercial. It positions Radox Herbal Bath as the liquid bath additive that "Helps put new life into

you," and tells the better value for money story, too.

We know you'll like it.

It's amusing and hard selling.

Watch out for it, it will be on air nationally from October.

## NEW LOOK PRESS CAMPAIGN



## £150,000 on Press

Starting next month you - and your customers - will be seeing the exciting new Radox Herbal Bath Press Campaign in all the biggest women's magazines.

The press campaign also clearly positions the brand and reinforces the better value for money story.

So now you know what you need - plenty of new Radox Herbal Bath.

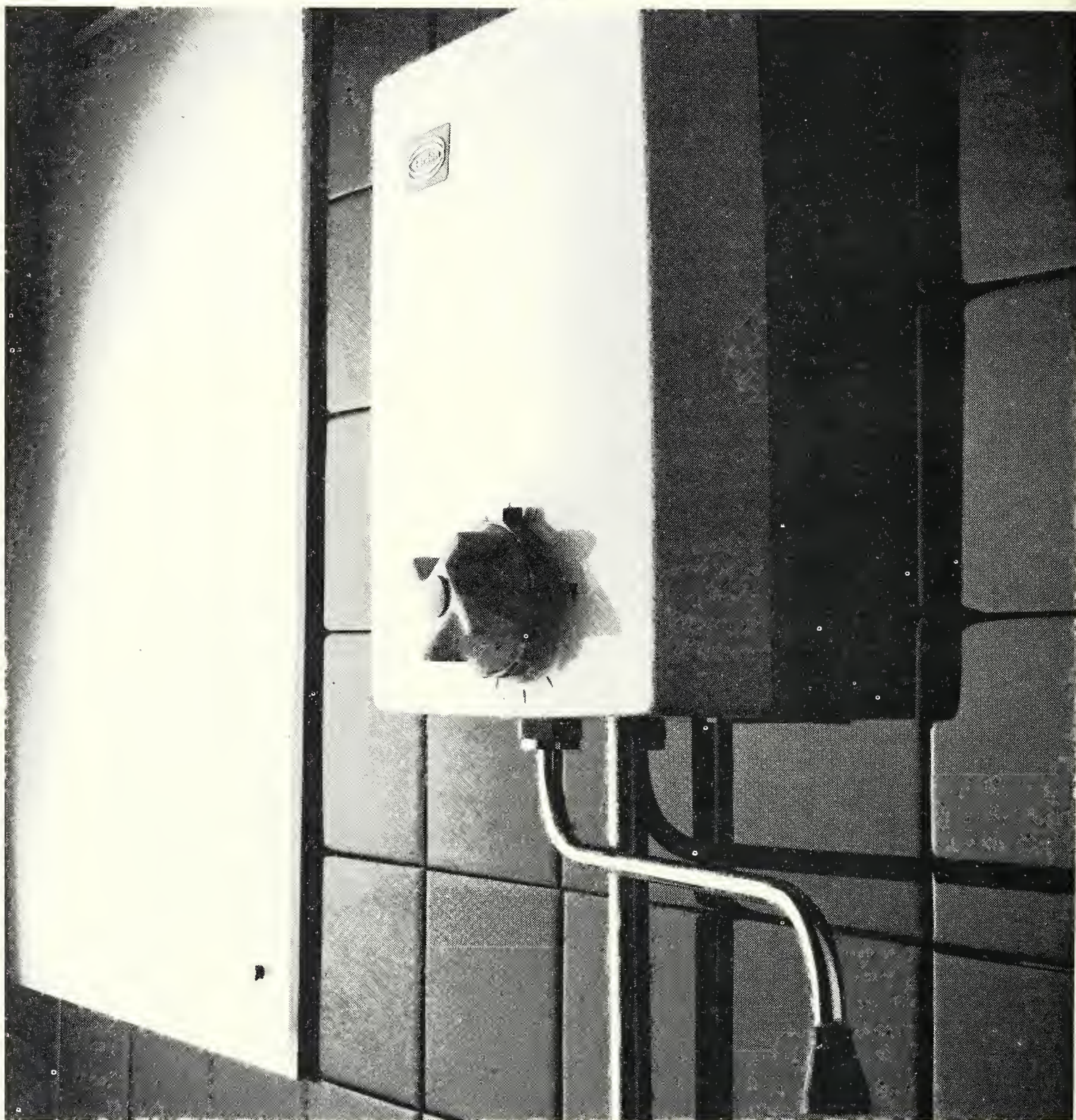
For a profitable future.

# RADOX HERBAL BATH.

**Nicholas**  
Pharmaceuticals, Toiletries  
Hospital Supplies  
Radox is a trade mark



# The Wash Room Attendant.



There's one Wash Room Attendant that's always on duty and provides hot water whenever it's needed.

It's an electric water heater.

Easily installed and compact enough to fit into the smallest 'smallest room'. No fumes, no flues, virtually no heat loss from pipework and very little maintenance.

Its advantages are readily appreciated in the summer especially if you have to go to the expense of keeping a boiler going just to heat water.

If you'd like to know more about electric water heating, contact your commercial heating specialist through your local Electricity Board shop or office. His advice is free.

## HEATELECTRIC

*The Electricity Council, England and Wales.*



Lincolnshire contractors fourth annual conference

# Reject the offer says Council member

Advice to the contractors' conference on Sunday that the remuneration offer from Mr Ennals should be rejected—and a warning that the essential small pharmacies scheme could constitute a subsidy for the leapfrogger—were given to contractors in Lincolnshire last weekend by Mr W. M. Darling, a member of the Pharmaceutical Society's Council.

Speaking at the fourth annual conference called by Lincs LPC, Mr Darling suggested that there had been confusion when the offer was first made, but since then PSNC had listened to the membership and tried to remove the confusion by issuing statements. There were two issues which had led to the confusion—the claim for the increase in the profit margin and negotiations for the small pharmacies scheme. The PSNC and the Society's Council had made representations on closures, resulting in the Commons motion expressing concern and calling upon the Secretary of State to pay regard to the claim for adequate remuneration. Mr Ennals had made an offer designed to benefit 70 per cent of contractors, but as it was being attacked even by those who would benefit "might there not be something wrong with the offer?"

Mr Darling said that, personally, he would reject the offer and return to the negotiating table on two platforms. First he would argue that while redistribution of remuneration to the smaller contractor should be by differential on-cost, only the £5m from public funds should be used—and there should be an attempt to have this amount doubled. Renegotiation of the redistribution should be no problem because the Secretary of State had indicated his willingness to consider any alternative method. Secondly, there should be continued negotiations on the profit margin for the benefit of all contractors.

Mr Darling suggested that two words—"small" and "essential"—seemed to have escaped the PSNC's attention in considering the offer. He had no intention as an individual of supporting the proposals as set out because he considered it improper that pharmacy should underwrite the leapfrogger, giving him a large on-cost whilst establishing himself to the detriment of existing services in the area. "I also consider it improper that you and I should subsidise a pharmacy that opens in a High Street, or in an area already having an adequate pharmaceutical service, for the main purpose of merchandising and selling cosmetics." The criteria for the scheme should be modified, said Mr Darling, but to qualify as "essential" a pharmacy should also have to satisfy a committee comprising pharmacists and representatives of the public. "I say to PSNC and the conference, before accepting the offer think of some of the people who in future will benefit from the higher differential on-cost."

Mr Darling added that he was not impressed by the veiled threat that the offer would be imposed if it was not accepted: "Let us stand up and be counted—if we do not agree, let us say so," he concluded.

## Unichem posters breach code

The Unichem poster which incorporates restricted titles (*C&D*, September 3, p300) is a much greater breach of the Pharmaceutical Society's code of conduct than the Independent Chemists Marketing Ltd advertisements. Giving that opinion to the conference Mr Darling claimed that if the use of the title "chemist" were permitted, the effect would be to allow anyone from the smallest one-man business to the largest public company to

use the title how and how often they liked—it was unwise to take the risk.

Pointing out that Council's view that use of the title is indirect advertising of professional services had been confirmed by branch representatives, Mr Darling said that if there was to be a change in policy it must be approved by the membership—over which Council must not "ride roughshod". He believed the vast majority of pharmacists thought it unprofessional to advertise their services and contended that advertising of commercial services could be achieved without the use of the title. Boots had not used the title for 10 years and must be watching the current debate with interest. The two companies now using the title did not sell goods to the public themselves and it had been argued that they therefore were free from restriction—but surely if that were so the directors of ICML would not have appeared before the Statutory Committee over "Care". Mr Darling said that many people asked Council to increase the status of the pharmacist: he did not think that the free-for-all use of the title would help.

## A single decision for LPCs

All next week's LPC conference has to decide is whether to accept an offer designed to reduce the imbalance between profit margins made by small and large volume contractors on NHS dispensing—all the other side issues that have been raised are irrelevant. That view was put to the Lincs conference by Mr Lewis Priest, a member of the Pharmaceutical Services Negotiating Committee, who said that many erroneous and misleading views had been expressed in the pharmaceutical Press over the past few weeks. He therefore felt it necessary to once again go over the method by which contractors are remunerated.

The contract, Mr Priest stressed, is a legal agreement between two parties—"We have a duty to the public and we must stick to it; the Department's part is to remunerate us an agreed amount of money". After cuts in remuneration enforced by Enoch Powell in 1964, contractors believed they were being underpaid—the Department said "prove it" and

*Continued on p 492*

A light moment for (l to r) Graham Walker, Bill Darling, Lewis Priest and chairman Bernard Lewis





Lincs LPC conference

# The contract explained

Continued from p 491

that took three years. Since then the factual method of assessment had been adopted, using a statistical sample. The Department paid the cost of the drugs supplied and refunded overhead costs which were verified by the inquiry. The payments not so readily verifiable were negotiable—the “profit” (or “return on investment” as the Department preferred to call it) and an element to recompense the contractor for his responsibility as a party to the contract.

Inquiries show how much time is spent on NHS work—from the porter taking in the goods and the girl receiving the prescription to a pharmacist dispensing or checking and a proprietor ordering or taking responsibility. The statistical sample was chosen by computer covering city centre, suburban or village pharmacy and small and large volume contractors. The results of the inquiry could be interpreted differently by statisticians of the two sides, but they held discussions to arrive at an interpretation favouring neither side more than the other. Both the Department and the PSNC could then draw up budgets.

The amount of return on capital depended upon investment in the NHS, in which the main assessment is dispensary stock with the interest geared to the time the stock is held. In 1964 this was arbitrarily set at eleven weeks but as conditions changed the Department felt it had become an overstatement. The stockholding inquiry was resisted by PSNC for many years but when eventually agreed it showed that the stock life had fallen to about seven weeks on average, thus the return on investment should be reduced. However, because there was a contract the Department did not unilaterally cut the stockholding from eleven to seven weeks: “The £11m is not a cut, it is money already received which is in the pool and most of it is in your pockets”.

## Minister accountable

But Mr Priest pointed out that the Department was accountable to the Minister and he to the Public Accounts Committee and Parliament—and he must be able to justify what he spent. Pharmacists had for two years since the inquiry, been paid what they should not have been and the Department was now asking for contractors to credit them with excess money paid (the “balance sheet” system did not allow for hard and fast sums; it was always fluctuating with costs updated by indices). The Secretary of State had in fact given an undertaking that

remuneration would not be cut. “We as pharmacists are in many ways in a healthier position than other people. We are as much part of the government service as others and all have had to take cuts. But we have a contract and because the Government cannot duck out of it we have gained.”

After a cost inquiry the new rates were usually paid from the following January, upgraded by Government indices to keep pace with inflation (heating, rent, etc). Other inquiries investigated container costs and discounts—there was a cut in the discount rate in June because it was shown that contractors were being over-discounted.

Mr Priest suggested there was a common misconception that the professional fee was for services and the on-cost profit for holding drugs. However, the fee also included some overhead costs—these could be divided in any way between fee and on-cost, but having part on the on-cost provided a hedge on inflation.

Finally Mr Priest stressed the meaning of “negotiations”. From letters in the Press it appeared many pharmacists would like to dictate to the Secretary of State, but since he was responsible to the people through Parliament, to do so would be anarchy. It was Government policy that the effects of inflation should affect everyone, and pharmacy could not expect preferential treatment.

## Code under attack

During the afternoon discussion forum, Mr Graham Walker, a Council member and the Lincs LPC secretary, argued that the code of conduct was under attack from within the profession—as seen from the results of a National Pharmaceutical Union poll and the desire of ICML and Unichem (both with pharmaceutical advice) to use the restricted title. If Council did nothing and sent offenders against the code to the Statutory Committee, which in turn took action, there could be an appeal to the High Court and a ruling that the restriction was a restraint of trade. The profession could lose everything if it did not come forward with a progressive policy.

This view was supported by Mr Priest (who was secretary to the Statutory Committee before entering private practice). He pointed out that under the Pharmacy and Poisons Act the chemist title was restricted for the purposes of trade—and one common activity of trade was advertising. Sooner or later someone would bring an injunction against the Society which Mr Priest believed it would be bound to lose—and in the process would have to spend a considerable amount of money. Nevertheless, he did not really believe that pharmacists were doing their job if they *needed* to advertise themselves as chemists.

Mr N. Baumber said that chemists were an endangered species and it seemed a strange policy to restrict a title and then not allow pharmacists to say that they

were professional persons by using it. Mr C. D. Ross, another of those wanting derestriction, disliked having to describe himself as “expert in Elizabeth Arden” in a church magazine. However, support for Mr Darling’s viewpoint came from Mr J. Benton who believed it was necessary for the professional body to maintain the status quo until a change had been proved beneficial.

Mr A. Goodson, a Community Health Council chairman, expressed concern that village chemists might be lost when health centres were opened with doctors dispensing from them. Mr Darling replied that it was a tragedy that successive governments had not seen fit to introduce legislation to restrict contracts within a quarter-mile of health centres—a policy which had received 100 per cent agreement within the profession. There was pressure on Health Service capital and he doubted whether squandering resources on fine health centre buildings would have a great deal of impact on the calibre of primary care. Mr Darling again preferred contract restriction when another questioner suggested that options on land for the building of a consortium pharmacy next to a health centre would be a disincentive to the leapfrogger. Among many points made on the remuneration offer Mr Ross (a PSNC member) said there could be no progress on overall remuneration while Mr Ennals felt that the money was being apportioned unfairly. Once distribution was fair, PSNC could go back on the question of notional salary.

Agreeing with another questioner, Mr Baumber said that if the Government kept up the pressure towards support of larger and more economical pharmacies, half the pharmacies would go out of business. “What we want to see is a more firebrand element in PSNC.”

## NFSE conference on small business and unemployment

The contribution that the small business sector could make to solving the unemployment problem is the main theme of a conference being held by the National Federation of Self Employed at 1.30 pm on October 2 at City Council Chambers, Barras Bridge, Newcastle-upon-Tyne. The conference is to consider asking the government to give certain concessions in return for a two-year training course for youngsters.

Ten cases where 42 jobs were lost in the past year through the effects of punitive legislation include that of a 56-year-old pharmacist who reports: “I have run a small business for 17 years. I employ one assistant. The government now regulates my profit to 16 per cent. I am obliged to keep a comprehensive range of stock. The cost of my stock has increased enormously and I can no longer draw a good income from the business because my money is all tied up in maintaining good stocks. I am therefore retiring at Christmas and closing down. I will have to dismiss my assistant.”



# PRICE INCREASES

## FISONS LIMITED—PHARMACEUTICAL DIVISION

### DERBY ROAD, LOUGHBOROUGH

THE FOLLOWING PRICE INCREASES ARE EFFECTIVE ON THESE GOODS DESPATCHED ON OR AFTER 1 OCTOBER 1977  
CHEMIST PRICE LIST (Retail and Wholesale)

PRODUCT		Prod. Code No.	Rec'd/md/ Fixed Retail Price each inc. VAT	MBU Doz.	Points Value per MBU	Rec'd/md/ Fixed Trade Price per Doz. ex VAT	Retailers disc price per doz. ex VAT	W/salers disc price per doz. ex VAT	VAT Rate %
<b>PHARMACEUTICAL PRODUCTS</b>									
ACNIL	25g	3230	£ 0.69	3/12	£ 3	£ 5.11	£ 4.73	£ 4.47	8%
ALUPHOS GEL	150ml	3140	0.57	3/12	2	4.21	3.89	3.68	8%
	2 litre	3160	D.P.	1/12	8	42.12	38.96	36.86	8%
ALUPHOS TABLETS 50's	(5 rolls of 10)	3130	0.64	3/12	3	4.73	4.38	4.14	8%
P.1 AURALGICIN		0120	D.P.	3/12	4	6.52	6.03	5.71	8%
CARDOPHYLIN TABLETS	0.1g 100's	2730	0.65½	3/12	3	4.85	4.49	4.24	8%
CARDOPHYLIN SUPPOSITORIES	0.36g 10's	3010	1.08	3/12	4	8.00	7.40	7.00	8%
	0.36g 50's	3020	D.P.	1/12	7	39.00	36.08	34.13	8%
P.1 S4B DIMYRIL Cough Linctus	150ml	6770	1.49	6/12	12	11.05	10.22	9.67	8%
	Capsules								
	20's	6710	1.01½	6/12	8	7.51	6.95	6.57	8%
T.S.R. FRAMYCORT EYE/EAR DROPS	5ml	5710	2.16½	3/12	9	16.04	14.84	14.04	8%
T.S.R. FRAMYCORT EYE OINTMENT	3.5g	6010	1.22½	3/12	5	9.09	8.41	7.95	8%
T.S.R. FRAMYGEN CREAM	15g	6560	1.57	3/12	7	11.63	10.76	10.18	8%
T.S.R. FRAMYGEN EYE/EAR DROPS	5ml	6450	1.21	3/12	6	8.97	8.30	7.85	8%
T.S.R. FRAMYGEN EYE OINTMENT	3.5g	6410	0.58	3/12	3	4.29	3.97	3.75	8%
GENISOL	58ml	3310	0.62	3/12	3	4.59	4.25	4.02	8%
	250ml	3340	2.15	3/12	11	15.92	14.73	13.93	8%
	600ml	3360	4.57	1/12	8	33.84	31.30	29.61	8%
T.S.R. HYALASE AMPOULES	5's	0910	3.32	1/12	7	24.58	22.74	21.51	8%
	20's	0920	11.37	1/12	22	84.24	77.92	73.71	8%
	100's	0940	D.P.	1/12	78	292.72	270.77	256.13	8%
MFERON AMPOULES, 5ml	5's	2910	6.00	1/12	12	44.44	41.11	38.88	8%
	50's	2920	47.98	1/12	95	355.39	328.74	310.97	8%
MFERON AMPOULES, 2ml	10's	2810	6.00	1/12	12	44.44	41.11	38.88	8%
	100's	2820	47.98	1/12	95	355.39	328.74	310.97	8%
MFERON TDI AMPOULES, 20ml	5's	2930	19.99	1/12	39	148.07	136.96	129.56	8%
MFERON D 5 × 5ml Syringes		2870	8.33	1/12	16	61.70	57.07	53.99	8%
MFERON D 10 × 2ml Syringes		2960	8.93	1/12	18	66.15	61.19	57.88	8%
P.1 PSOROX OINTMENT	25g	3740	0.71½	1/12	1	5.30	4.90	4.64	8%
	50g	3750	1.04	1/12	1	7.70	7.12	6.74	8%
P.1 PSOROX LOTION	200ml	3780	1.58½	1/12	3	11.73	10.85	10.26	8%

Products marked thus are subject to Fixed Retail and Trade Prices.

## Postgraduate training essential, says Guild

Postgraduate pharmaceutical training is a primary function of the pharmaceutical service, the Council of the Guild of Hospital Pharmacists decided at its September meeting. The Council, discussing a resolution of the London branch and East Midlands group, agreed that postgraduate education should be a condition of service and referred the matter to the joint working party of the Pharmaceutical Whitley Council.

The divisional officer, Miss D. Haber, reported that a programme of interviews with a representative cross-section of postholders of those grades under review had now been arranged and that it was hoped to complete the interviews by the end of the year. Council stressed the urgency of finishing negotiations on any changes in grading structure and salaries which may be necessary as soon as possible and asked that the joint working party move quickly on the matter. Following a question on the funding of superannuation contributions as a result of the new state pension scheme Miss Haber agreed to arrange an explanation of the position to

appear in *Medical World*. No further progress had been made concerning the position of the regional pharmaceutical officer (Oxford) and the divisional officer agreed to pursue the matter with the Oxford Regional Health Authority.

It was reported to Council that the North Western Regional Health Authority had set up a working party of Authority members to examine a proposal that a review take place of the Lancashire Area Health Authority to determine whether it should be split into smaller, single district area health authority's. Council agreed to support such a proposal.

Following previous discussions on the Quality Control document HN(77)64, Council agreed that the president, vice president and professional secretary would represent the Guild at a meeting with representatives of the Department, the Pharmaceutical Society and regional pharmaceutical officers when the implications of HSC(IS)128 as well as HN(77)64 would be discussed.

The district member for Wales reported that, following discussions on the respon-

sibility for the ordering and supply of pharmaceuticals in Wales, a circular would soon be issued by the Welsh Office exempting pharmaceuticals from the general supplies system. Proposals would then be circulated to Area Health Authorities suggesting the formation of a drugs committee and a dressings committee to look after contracting.

The president reported that the recipient of the Nicholas Award for 1977 was Mr R. H. Leach, area pharmaceutical officer, Birmingham Area Health Authority. Council agreed to recommend to the annual meeting in 1978 that in accordance with a resolution passed at the branch delegates meeting earlier this year the period of office of district members be extended to two years. This recommendation, if carried, would take effect from the 1979 elections.

A suggested programme on unit dose packaging for Interphex 1978 and topics for a single discipline workshop on clinical pharmacy also in 1978 under the auspices of the King's Fund were accepted. The editor reported that the first issue of the Proceedings of the Guild was up to schedule and should be distributed to members in October or November.



# Why pharmacy needs a poll and a political plan

*At the Conference of Local Pharmaceutical Committee representatives to be held on October 2, discussion will centre on whether or not to accept the Department of Health's proposals for a differential on-cost which would redistribute money from the larger to smaller contractors. Below, a proprietor pharmacist, Mr K. C. Sims, MPS, gives his reasons why the offer should be accepted and suggests a plan to draw public attention to pharmacy's plight. He also advocates a referendum among pharmacists to register the level of feeling with the Pharmaceutical Services Negotiating Committee*

There can be few retail pharmacists, who, over the course of years have not experienced a period when a graph of weekly takings showed a level consistently lower than expected, or when the till never seemed to balance, or when an earlier than usual cashing up found more money in the drawer than was registered; and, finally, despite deep unwillingness to admit it, it had to be acknowledged there was a thief on the staff. Inevitably there had to follow the distasteful business of catching someone who at best destroyed peace of mind and at worst endangered commercial viability. Most of us know well the reluctance felt in accepting the unpalatable truth and its consequences. It is not comfortable.

## Phase us out

Similarly with our contract. I regret that by my reading of the facts of contract remuneration over the past few years, the only possible explanation for the treatment we receive would appear to be that a decision to phase us out was taken politically some years ago, was acted upon, and that the plan is already satisfactorily advanced with closures diminishing our strength daily. It has been fortuitous that a number of other factors have speeded the process so that it has not been necessary to show the iron political hand, until now, apparently when we are judged weak enough. *Misjudged*, I think, for reasons I shall try to develop.

In the first place let us agree that we and our negotiators know only frustration in our attempts to get a better deal from intransigent governments, left or right; but after years of it, to continue to cry for our own negotiators' blood seems not only naive and ungrateful but potentially suicidal for there is nothing politicians like better than fresh, inexperienced opponents uncertain of their support. We have to give our team time to develop and gain experience, not to give them the raspberry because they didn't kill Goliath first time. Are they not ourselves you and I, fighting for our threatened futures? Although we are disappointed, our first consideration is to survive, for now is a time to be realistic.

We must accept the sop we are offered

for three reasons. Firstly it will help the smaller businesses, which is important to me at least; secondly, and more important, it is likely to encourage the larger companies to look hard at the contract, and may prove to be the stick to beat us into a proper unity of interest for effective combined action; and thirdly, it will give us time to prepare for political action.

## Thorough campaign

We will need time to mount a thorough campaign of public education so that our dilemma is clearly understood by all. Moreover the programme will show that our true strength, far from being our mere 11,000 is probably a thousand times that, for it lies with our customers whose goodwill we have, and for whose active support we have only to ask. It will bring a novel twist to politics, but properly done will be an effective means of pressure.

The last pharmaceutical public education programme on which I was engaged concerned the collection of surplus medicines which produced a surprisingly large response, mainly from the distribution of some 500 pamphlets per shop and a small window sticker.

We have an effective means of reaching our public. We have only to point out in a pamphlet, say 1,000 per shop, that their pharmacy might no longer stay in business because, traditionally National Health Service dispensing has been partly subsidised by the retail activities of the shop. Because of inflation those activities have declined or become less profitable so that the pharmacist can no longer support even stock replacement unless the government recognises that the free prescription service must be paid for at a level which allows for this.

At this point we should talk about real money, taking an average pharmacy as an example. Figures for the inflationary increase in stock value should be given and the fact made clear that the pharmacist has to find this money from somewhere and then pay tax on it as profit. Talk about the £1,000 average clawback. Point out what the disappearance of the business could mean to young mothers and the elderly and those who ask and receive

our unpaid assistance so many times daily. Talk of the alternative, large semi-official dispensaries. Talk about pharmacists who have had to sell off their stocks to retire after years of service, not the "jazziest" of retailers perhaps, but men whose departures are leaving a sense of real loss in their communities.

Finally, let us personally ask those customers who need us, to write to their Member of Parliament (whose address we already have on a stamped envelope) telling him that they want their local pharmacy to stay in business and to ask that MP what steps he is taking to ensure its survival.

Given that there are more than a couple of pharmacies per constituency if only a hundred patients per shop wrote, the effect would be considerable and, as a first step to our greater strength of elbow could hardly be bettered.

I know from discussions with my customers that they are already alarmed at the developing pattern of closures and want to help.

## Develop plan of reforms

While this programme is getting underway it is essential that we develop a hefty plan of reforms so that when the "bump" comes we will all know what we are aiming for and our negotiators will have our unanimous support behind them. How exactly are we to do this? Each week we read letters in the journals expressing exasperation, despair and frustration on the one hand and on the other many thoughtful letters suggesting ways of improving our lot. The continuing weight of this correspondence indicates a depth of feeling which demands action.

Now is the time to ask contractors some 20 critical questions based on the recent correspondence. A referendum cheaply duplicated, asking for yes or no answers to whether we want, for example: Modifications to the present contract by increased on cost, increased fees or relief on inflationary stock increases; to scrap the present contract which is complex and to substitute a 50 per cent on cost but no fee; to limit supplies of drugs to set periods (room for talk here); pensions for contractors; limitation of new openings by the Society via local branches or by contractor committees. The final question would be: "Are you prepared to resign the service if asked to by our negotiators?". With the answers to a comprehensive but terse questionnaire in hand surely we will have something positive to argue from.

In setting out what we want we should also examine some of our accepted practices critically with a view to offering an improved service. For example, our rota service (instituted presumably so that businesses would not lose out from busy evening surgeries) can deceive no one into believing it to be an adequate after hours service. Doctors are expected to and do, take over the service. Much better that we should scrap late hour work altogether in the cities and offer in modest premises a



dispensing service from 7 to 11 pm every evening for genuinely urgent prescriptions. They would be so marked by the physician, whose co-operation we could invite by accepting telephone prescriptions which could be delivered if necessary by contract taxis to the patient's need. Any fares and a late night fee could be paid by the patient and no doubt benevolent government would repay in part or in full to deserving cases. A resident pharmacist would take late calls after hours as in New Zealand where such a scheme has operated in the major towns for 50 years. We should think of one dispensary per population unit of about 10-150,000 and could well take over some of the declining small businesses near suitable centres to do so, consortium fashion. We should also be having discussions with the British Medical Association with a view to joint action in clearing up points of dispute, particularly in encouraging them to revolt against their incredible levy to the capitation fee contract (so much per acre?) whose worst results were seen in those patients to whom their doctor appears as a pen poised above paper the moment they step into the consulting room. That they turn to us for help and advice is a fact, but is not profitable to us in our relations with our GPs.

I believe that the concept of insurance as a payment to protect against the full cost of medical treatment should be re-emphasised within the NHS replacing what has grown to be an almost religious

belief that the scheme will provide free perfect health on demand as of right, which is not only unrealistic, but places an impossible burden on the doctors.

To make clear the insurance element the doctors should reconstitute their practices as private ones with their consultation fees being paid by the patient

who is then repaid fully or in part according to age and need. There is no doubt that there would follow a reduction in work load and a new or perhaps the old mutual respect re-established between doctor and patient. With our various houses in order we could look forward to a time of harmony between medical professions.

## Plastic Industrial Containers Association

The aims of the Plastic Industrial Containers Association are set out in a new leaflet, available from the association at 1 George Street West, Luton, Beds. The association, which is affiliated to the British Plastics Federation, originated in 1975 and was registered this year. Its main objective is to promote the growth and use of plastic containers.

In 1976 some 28m open-topped plastic containers, ranging in size from 250 ml to 30 litres, were marketed by the five member companies of the association.

## British Institute of Regulatory Affairs formed

The radical changes in the operation of registration departments over the past ten years have led to the formation of a new professional body, the British Institute of Regulatory Affairs. Keeping up to date is a major problem for registration staff, and to satisfy this need BIRA intends to hold a

number of meetings and seminars for members each year.

The inaugural meeting will be held at the Pharmaceutical Society of Great Britain, 1 Lambeth High Street, London SE1 7JN, at 10 am on November 15. It will be open to both members and non-members, and tickets are available on application.

Membership application forms and further information about BIRA are available from the secretary/registrar, Dr J. I. Shaw, PO Box 53, Sandwich, Kent.

## Tablet-making trainer revised Appendix

The Chemical and Allied Products Training Board have revised Appendix I to the "Tablet making training manual (C&D, April 16, p546). The existing Appendix I "Guide to good pharmaceutical manufacturing practice" is now Appendix IA, and a new Appendix I is entitled "Good manufacturing practice".

Copies may be obtained from the Board at Staines House, 158 High Street, Staines, Middlesex TW18 4AT.

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# Currys



# Boots manager 'falsified cash statements'

A former manager of the original Boots pharmacy in Nottingham was reprimanded by the Pharmaceutical Society's Statutory Committee last week for offences committed when manager of the company's Arnold branch.

Mr Eric Knight, 56, of Woodborough Road, Mapperley, was convicted at Nottingham Magistrates Court in February of stealing £5.05 belonging to Boots, falsifying a weekly cash statement and stealing goods worth £7.60 from Boots. Two other offences taken into consideration concerned money found to be missing from February 28, 1975.

Mr Knight, who had worked for Boots for 30 years, was ordered by the court to pay £316.29 compensation and was dismissed as a result of the conviction. He did not attend the disciplinary hearing but wrote to the Committee saying he had lost his self respect. Mr Robert Chatterton, a Society inspector, said he had never had anything adverse to report about the way Mr Knight ran his pharmacy. He was a wealthy man with means of his own which made the offences seem all the more unnecessary. He did not need to work, Mr Chatterton said.

## Self-medication

A 30-year-old principal pharmacist at Glasgow's Belvedere Hospital who stole medicines with the intention of treating himself and his nursing-sister wife was reprimanded by the Committee.

Peter Headridge, High Mains Avenue, Dumbarton, described by his superiors as "bordering on the brilliant", appeared following a conviction for stealing pharmaceutical products from the Belvedere Hospital and Glasgow Royal Infirmary. He had worked at both hospitals.

He said he had suffered considerable and increasing mental strain because of pressure of work and staff difficulties at the hospital. Then he got viral pneumonia. He returned to work but he was not fully fit. His wife was a sister at the Belvedere hospital and within 24 hours of him catching the pneumonia she also caught it. Mr Headridge said that some of the medicines found in his possession were prescribed by the doctor who was treating them. He added: "This was probably where we got the idea of self-medication."

He stole the drugs between May and July last year basically due to pressure of work, staff difficulties and some domestic problems. The staff pharmacist left and committed suicide, he said. He was out of work for over a year. He had to live off his

savings and he lost all his self-respect.

Detective Chief Inspector John Beattie said some of Mr Headridge's superiors felt that his very "brilliance" might well have caused some of the pressures on him—in that his ability as a practical pharmacist was not commensurate with his mental ability.

Mr Robert MacKay, the Society's inspector, said he helped Mr Headridge to get another job. He was now branch manager of a private pharmacy and his new employer was very satisfied with him.

A Cuffley chemists which broke the law by dispensing 20 prescriptions without the supervision of a pharmacist was disqualified as an authorised seller of poisons for three years. The order was made against Janray Ltd, Station Road, Cuffley, which has three months to appeal.

Proceedings against its superintendent pharmacist Mr Shantilal Buddhdev of Brantwood Gardens, Oakwood, Enfield, were adjourned for 12 months. He will then have to come before the Committee to give an account of his activities. Mr Buddhdev's appearance followed his conviction by Cheshunt magistrates in April for three offences of unlawfully supplying pharmaceutical preparations. The company was convicted of five similar offences.

## Mouse droppings

The Committee decided to take no further action against a Brixham pharmacist after hearing he no longer used a store which was said to have been in a dirty condition with mouse droppings.

They considered he had been doubly punished by appearing at a magistrates court and paying a fine after pleading guilty to offences under the Food and Drugs Act. The local district public health inspector, said when he inspected the storeroom, he found heaps of cartons, untidy piles of pharmaceutical preparations and a quantity of mouse droppings. When he made a second visit there was still evidence of mouse droppings on shelves, floor and goods and he saw no traps or rodent bait.

Mr Josselyn Hill, for the Society, said that on April 19 the pharmacist pleaded guilty to three offences under the Food and Drugs Act relating to food hygiene. He was fined a total of £125, ordered to pay an advocate's fee of £20 and an analysis fee of £12.42.

A pharmacist was reprimanded by the Committee for offences under the Misuse of Drugs Act. The offences came to light

after the shop, at Abington Square, Northampton, owned by Mr Jat Singh Sehmi, had been broken into in May last year. Mr Sehmi, 29, Thorpe Road, Weston Favell, Northampton, was then questioned by the police and seen by the Home Office inspector.

Police Sergeant John Harvey told the Committee he investigated a burglary at Mr Sehmi's shop. He understood that the Controlled Drugs had been stolen. His investigations showed that certain entries were missing from his Register concerning the supply and receipt of drugs. He discovered that Mr Sehmi had failed to date certain prescriptions at the time they were dispensed.

Mr Sehmi agreed that the entries had not been made, and said these had been overlooked because shop alterations were in progress at the time.

In the circumstances, and bearing in mind that Mr Sehmi was still a young man with a career in pharmacy before him, the Committee would do no more than administer a reprimand, said Sir Gordon Willmer, the Committee chairman.

## Large scale drug taking

A pharmacist at Cirencester Memorial Hospital said to have taken to large scale drug taking to relieve the pressure of his job was reprimanded by the Committee. He heard that Mr Walter Chambers, a pharmacist, obtained over 4,000 dexamphetamines between January and October, 1976.

Detective Sergeant David Barnett, Gloucestershire police drugs squad, said that Mr Chambers, staff pharmacist, told him he ordered the drugs from wholesalers through the hospital, but paid for them himself. The officer said he found no evidence that Mr Chambers was involved in drug dealing. He was dismissed after magistrates court proceedings, for unlawful possession of drugs. Mr Chambers had written to the Committee explaining his personal problems and circumstances.

## Dangers of self-service

Sir Gordon warned pharmacists warning self-service shops of the dangers of putting Part 1 poisons in easy reach of the customer. Reprimanding an Ashford, Kent pharmacist and his company who had admitted doing this, he said that sales of poisons displayed in this way were much more difficult to control and supervise.

Before the Committee was Mr Bryan Weightman, of Elm Lea, Bartholomew Lane, Saltwood, Hythe, Kent, chairman of Bryan Weightman Ltd, Stanhe Square, Ashford. Mr Josselyn Hill, for the Society, said that in May the company pleaded guilty at Ashford magistrates court to selling a Part 1 poison (Murex) without the supervision of a pharmacist under the Pharmacy and Poisons Act. The company was fined £40 and ordered to pay £100 costs.

The chairman said the matter could not be overlooked, but Mr Weightman was a responsible and reasonable man.



# Letters

## Grass roots opportunity

Local Pharmaceutical Committees can rarely, if ever, achieve the ideal situation of reflecting accurately the "grass roots" opinions of general practice pharmacists, within any particular area, and it is unfortunately true that members of the pharmaceutical profession are continually accused of apathy and total lack of interest in the decisions made on their behalf by the professional bodies.

May we therefore strongly appeal to all pharmacists in the London area who are engaged in general practice, to make every effort to attend at the Bonnington Hotel on Tuesday October 4, at 7.30 pm, and thus demonstrate to our negotiators, that we are far from "apathetic" about the present position facing general practice pharmacy in this country.

**Geoffrey Noden**

Secretary, London Group  
Pharmaceutical Executive, NHS

## Xrayser's shame?

Xrayser referred to the meeting arranged by myself with the connivance of the local committee at Sheffield Pharmaceutical Conference—somewhat critically for some reason. He appears to feel that one day at Lambeth is sufficient for delegates to make up their minds and give guidance to our negotiators. Xrayser will realise that there is no formal opportunity for contractors to meet together at the British Pharmaceutical Conference—nor indeed at any other time, and if nothing else our meeting did give chairman Mr Worby another platform from which to try out a few ideas. Does Xrayser believe this was wrong? Is he, like too many pharmacists, ashamed to talk about money? I have a wife and three children to support and as far as I am concerned money is a five-letter word, not four. It's real and essential.

I regret, obviously, that only 12 attended the meeting, but in view of the very limited publicity, and the very few genuine contractors from England and Wales attending the Conference I am not so downhearted—it was the only meeting I have attended at which everyone spoke! There were, too, contractors representing a wide range of interests and it may be of interest to Xrayser that most of them were critical of sanctions of every kind. I can assure Xrayser that my belief—that sanctions will not work—was confirmed.

An interesting and useful discussion took place and I am sure Mr Worby will have benefited from hearing more opinions.

Finally might I say to Xrayser that he is misnamed. He does not want to reach the heart of the matter—only to keep discussion on a shallow, uninformed level. As

far as I am concerned the more discussion and reporting of that discussion the better. We ought sometime to turn pharmacy from an autocracy to a democracy.

**Miall E. James**  
Canvey Island, Essex

## DMPA against CRCs for household chemicals

Child-resistant closures for liquid household chemicals would not only add to the cost of products for all consumers but would provide little, if any, protection in the home environment where child poisonings were most likely to occur, according to the Disinfectant and Maintenance Products Association.

In its annual report, DMPA (formerly British Disinfectant Manufacturers' Association) says that the Department of Prices and Consumer Protection were

pressing both the industry and British Standards Institution to start work on child-resistant closures for liquid household chemicals.

A spokesman told *C&D* that a government survey had shown the incidence of poisoning from household chemicals to be low and where they were suspected few adverse effects resulted. Where household chemicals were implicated many of the products had been in use and had had no cap on at the time of handling by a child. Because only 20 per cent of families had children under five years old, DMPA felt it unreasonable to expect the remaining 80 per cent of consumers to pay higher costs. Child resistant closures were not particularly suitable for liquids and the spokesman thought labels warning of the dangers of leaving chemicals within children's reach would be more effective at preventing accidents.

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# Professional News

Pharmaceutical Society of Ireland

## Tribute paid to president for Seanad campaign

A tribute to Mr M. F. Walsh, president, Pharmaceutical Society of Ireland, and Mr Foley, campaign manager, for their part in the recent Seanad election for which Mr Walsh offered himself as candidate, came from Mr M. Shannon at last month's Council meeting.

Mr Shannon chaired the meeting in the absence of Mr Walsh who was attending the FIP Congress of Pharmaceutical Sciences in the Hague. Complimenting the president on the campaign, Mr Shannon said Mr Walsh had done an excellent job, travelling extensively all over the country. The number of first preference votes received by Mr Walsh did not adequately represent the support he had received; he had attracted many number two votes. On behalf of Mr Walsh, Mr Shannon thanked pharmacists in all counties for their considerable help both financial and otherwise. The members praised Mr Walsh for going forward, despite the fact that he had little chance of success against the efforts of the major political parties.

Speaking of arrangements for the forthcoming Congress in Galway Miss T. Landers said accommodation was limited and advised immediate booking. Tickets for the banquet were limited to 400.

The Federation of Professional Associations, of which the Society is a member, adopted a proposal at its annual meeting "That the incoming Council should organise a major conference for the purpose of examining present national policy and trends and to put forward goals and objectives which, from the standpoint of each profession, are in the national interest and, therefore, in the interest of each profession." The Society has been asked to put forward any proposals relevant to the national interest and the Practice of Pharmacy Committee is to discuss it at its next meeting. Mr M. F. Walsh and Mr M. J. Cahill, last year's Federation Council representatives, were renominated.

A meeting of the Law Committee is to discuss a draft of the Misuse of Drugs Regulations 1977 and to submit comments to the Department of Health. The Cancer Research Advancement Board has requested help in circularising members with details of the Board's scheme of covenanted subscriptions. The Society has agreed to supply the Board with envelopes addressed to all members.

Reporting on the European situation, Mr R. J. Power said that as suggested by the Irish delegation at the EEC Groupement Executive, there would be a meeting of the Executive before the General

Assembly of European Pharmacists in Athens. It was hoped that that would make better use of General Assemblies and cut down the number of meetings. Also in Athens there would be a discussion on the proposed Directive concerning defective products, on which the Irish delegation had specific views to express.

Their Licence Certificates having been signed and sealed, E. Egan, 104 Marlborough Road, Dublin 4, and M. Foley, 136 Parnell Street, Dublin 1, were nominated for Society membership. T. A. Casey, 6 Stillorgan Park, Blackrock, Co Dublin, was also nominated. J. D. Costello, S. A. Kelliher and G. O'Neill were elected members.

The following names were changed in the Register, marriage certificates having been submitted: Mrs B. A. Dunne (nee Brennan), Asst; Mrs C. Gallagher (nee Butler), Asst; Mrs E. J. Hanratty (nee Callaghan), Asst; Mrs I. M. Loughnane (nee O'Rourke), Asst; Mrs E. Murray (nee O'Donnell), LPSI, and Mr P. L. O'Sullivan, Asst, were restored to the Register.

The registrar and secretary reported with regret the death of Messrs J. D. Broderick, MPSI; P. J. Higgins, MPSI; M. G. Kieran, MPSI; P. J. Murphy, MPSI; A. V. Tully, MPSI; J. C. Casserley, dispensing chemist and druggist.

### Company statement

## Buoyancy of trade Press advertising

The 1976-77 financial results of Benn Brothers Ltd (publishers of *Chemist & Druggist*) represent substantial progress, says the chairman, Mr Richard Woolley, in his annual statement. Group turnover reached a new record of £7.562m (£6.521m in 1975-76) with profit before tax £758,118 (£554,913).

Mr Woolley records that turnover benefited from the buoyancy of the journals' advertisement revenue. "Apart from the increased advertisement rates necessary to offset a continued rise in costs these higher revenues are an increasing recognition by companies that advertising in their trade and technical journals is a vital part of their marketing approach if they are to make progress."

The national publicity given almost daily to the defects of British industry overlooks that there are thousands

## Coming events

### Monday, October 3

**East Metropolitan Branch, Pharmaceutical Society,** Churchill room, Wanstead library, Spratt Hall Road, Wanstead E16 6JH, at 7.30 pm. Mr G. E. Appelbe (deputy head, Pharmaceutical Society's law department) on "How the Medicines Act 1968 affects pharmacists".

**Stockport Branch, Pharmaceutical Society,** Acton Centre, 187 Buxton Road, Stockport, at 8 pm. Dr F. N. Leach on "Drug interactions".

**Teesside Branch, Pharmaceutical Society,** West Lane polytechnic centre, Middlesbrough, at 7.45 pm. Dr D. H. Kenworthy on "Renal dialysis and kidney transplants".

### Tuesday, October 4

**Lincolnshire Branch, National Pharmaceutical Association,** Coach and Horses, Billingham, near Sleaford, at 8 pm. Mr W. A. G. Kneale (EEC liaison secretary, NPA) on "European pharmacy—which way is it going?"

**London Group Pharmaceutical Executive, National Health Service,** Bonnington Hotel, Southampton Row, London WC2R 2AL, at 7.30 pm. London chemist contractors' conference.

### Wednesday, October 5

**Chiltern Region, Pharmaceutical Society,** Postgraduate course: Four evening lectures on "Recent developments in therapeutics", Wednesdays 8 pm, October 5 to November 2. Details from graduate education division, department of pharmacy, Chelsea College, Manresa Road, London SW3 6LX.

### Thursday, October 6

**Bradford and Halifax Branch, National Pharmaceutical Association,** Victoria Hotel, Bridge Street, Bradford, at 8 pm. Mr J. F. Holliday (administrator, Bradford area health authority) on "The Family Practitioner Committee".

**Burnley Branch, Pharmaceutical Society,** Ram Inn, Cliviger, at 8 pm. Talk by Dr K. N. Leach on "The ancient Egyptian health service".

**Society of Cosmetic Chemists of Great Britain,** Royal Society of Arts, 6 John Adam Street, London WC2, at 6.30 pm. Mr M. Owen (Advertising Standards Authority) on "Advertising and its controls—with particular reference to the cosmetics and toiletries industry".

**Thames Valley Pharmacists' Association,** Winthrop House, Surbiton, at 8 pm. "Business with pleasure"—illustrated talk by Mr N. J. Van Abbe.

### Advance information

**Worthing and West Sussex Branch, Pharmaceutical Society,** Beecham pharmaceutical factory canteen, Clarendon Road, Worthing, October 19, at 7.30 pm. Sherry reception and mini-exhibition followed by two talks: Dr H. Ferres on "Ampicillin development" and Mr J. V. Burke (marketing operation manager, Beecham) on "Taking ampicillin development to the doctor" (including film on "Prodrugs"). Reservations to Mr H. F. Walton, 16 Kingsway, Bognor Regis PO21 4DQ.

**Bedfordshire Branch, Pharmaceutical Society,** Crown Hotel, Biggleswade, October 20. Working dinner. Principal speaker, Miss M. Tomison (Press officer, PSGB). Ticket £3.50 including wine from Mrs M. P. Stanton, Stevenage SG4 4JH, extension 481, by October 13.

of small and medium size companies overcoming the difficulties of trading and adapting their activities successfully to the requirements of the home and export markets.

"These are typical of the companies forming the majority of our advertisers and they have increasingly recognised that the group's journals can help in that task through a first class service."

Mr Woolley announces that the next step in the Group's campaign to promote trade Press advertising will be the publication next month of a report on its value—including the findings of some new research among leading businessmen. Another development is the formation of a new company, Benn Brothers Promotions, to undertake special projects and services to meet the requirements of the industries with which the Group is associated.



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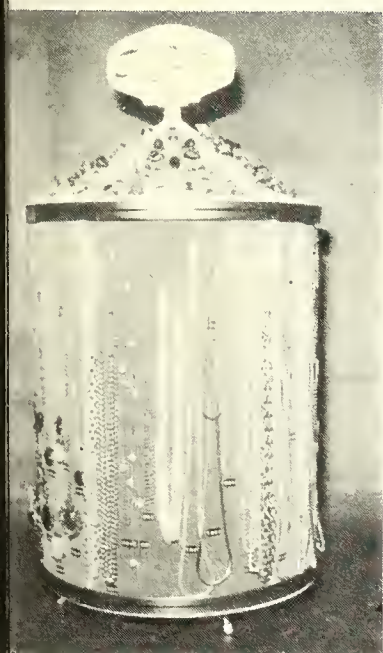
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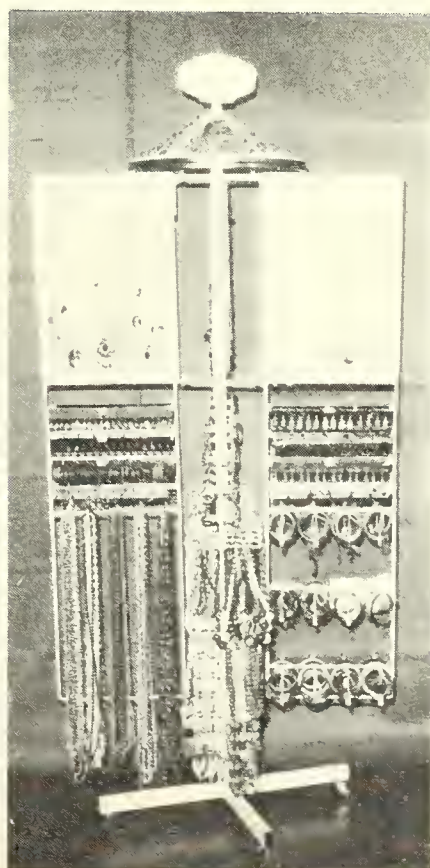
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# Company News

## Bayer AG bid for Miles laboratories

Bayer AG are making, via an overseas subsidiary, a cash offer of at least \$40 per share to the shareholders of Miles Laboratories Inc, Elkhart, Indiana, USA. If the bid is successful, Miles will continue as an independent company under its existing name and with its headquarters in Elkhart. It is also planned to concentrate all Bayer's pharmaceutical activities in the USA at Miles.

In addition to pharmaceuticals, Miles' products include diagnostic materials, household materials, high-protein food-stuffs, and chemical products for manufacturing industry.

Turnover of Miles in 1976 totalled \$450m and profit after tax was \$16m. The number of shares issued is 5.4m.

## Bristol-Myers 1976 sales and profit set new record

In the past five years Bristol-Myers Co more than doubled their net earnings and almost doubled their sales, according to the annual report for 1976. World-wide sales in 1976 amounted to \$1,986m, a 9 per cent increase over the previous year. Net income rose 11 per cent to \$156.8m.

Sales of consumer products in the USA reached record levels, and it is stated that Ban became the leading deodorant. Sales of the international division totalled \$547m, a 7 per cent increase over 1975 after allowing for the effects of currency fluctuations. Amikacin, the aminoglycoside antibiotic introduced in 1975, is now being marketed in 20 countries.

During 1976 approval was received from the Food and Drug Administration to market CeeNU, the first of a new class of nitrosourea anti-cancer drugs. Two other anti-cancer agents, ftorafur and carminomycin, have been licensed with an agency of the Soviet Union and are undergoing tests to confirm their safety and effectiveness for marketing in the USA.

## Good half-year for Fisons pharmaceutical division

Pre-tax profit of Fisons Ltd in the six months to June 30 amounted to £8.5m, compared with £10.3m in the same period of 1976, the reduction being due to a sharp drop in the profitability of the fertiliser division. All other divisions except horticulture increased their profit.

Sales of the pharmaceutical division were £28.6m compared with £25.2, and the "activity profit" was £5m (£4m) after

deducting research and development expenditure of £3.1m (£2m). The improvement in pharmaceuticals was mainly overseas.

In the UK steady progress is being achieved with the new Somophyllin bronchodilator range. No growth is yet apparent in the cromolyn sodium market, but the Syntex settlement recently announced should provide greater opportunities for penetration although the company anticipate that recovery will be slow. Nalcrom, a new product based upon DSCG, has been approved for sale in the UK as adjuvant treatment in certain inflammatory conditions of the bowel.

## WB to invest £1.5m

Coinciding with the presentation on Tuesday of the Queen's Award for Technology to Sorex Ltd by the Lord Lieutenant of Merseyside, Brigadier Sir Douglas Crawford, CB, DSO, TD, the parent company Ward Blenkinsop & Co Ltd announced a further new investment in plants worth £1.5m. With investment currently in hand, this brings the construction programme up to about £3m.

Announcing the decision, Mr G. W. Groves, director and general manager, said that the company is moving into a new phase in its development. The new plants will make constituent materials for antibiotics and anthelmintics. With record sales in 1976 of £11m (against £8m the previous year, Mr Groves said the company is ploughing back a substantial proportion of its profits into a major effluent cleaning project and production.

## Briefly

**Ciba-Geigy UK Group** sales for the first six months of 1977 were £151.7m, an increase of 28 per cent over the comparable figures for 1976. Exports amounted to approximately £60m, an increase of 32 per cent.

**Dalton Supplies Ltd**, Nettlebed, Hen-on-Thames, now have the following telephone numbers: Nettlebed (04) 641377, 641457, 641487, 6414641544.

## Appointments

**De Witt International Ltd:** Mr David Morris and Mr John Metselaar have been appointed general export sales manager and general home sales manager.

**Rockware Glass Ltd:** Dr John Wild has been appointed operations director of factory at St Helens, taking over from David Shepherd who has become manufacturing director, Rockware Glass Ltd.

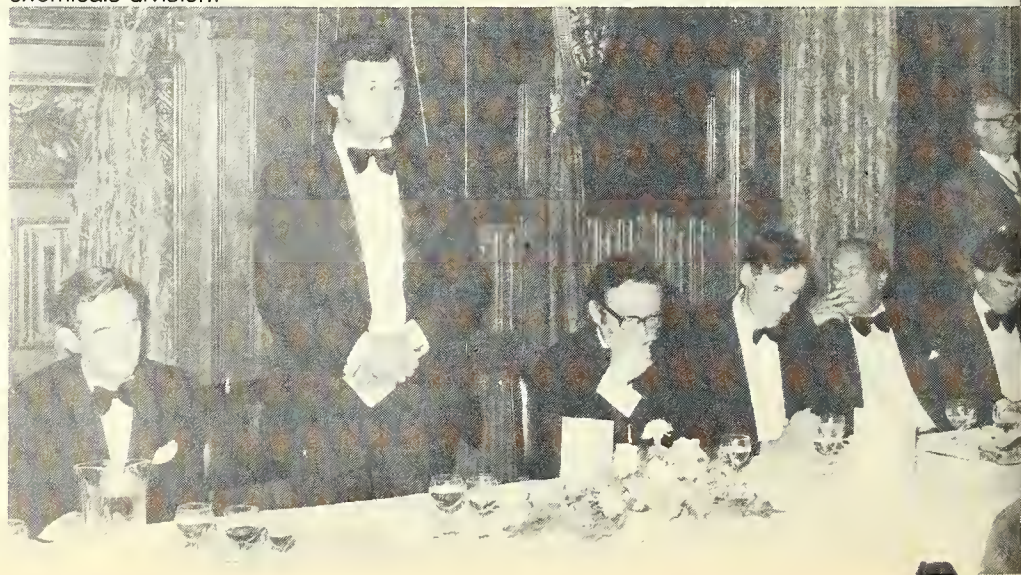
**Potter's (Herbal Supplies) Ltd:** Timothy Whittaker, BSc (Pharm), has been appointed assistant to the technical director with particular responsibility for production.

**Carters Tested Seeds Ltd:** Mr Ivan R. has been appointed sales manager for England and Northern Ireland. Mr Jim Maghill, David Jackson and Mrs May Ball are representatives for Ulster, and Eire will be covered by Mr Dermot A. O'Donoghue. Mr Paddy Gibney and Mr Harry Holdstock.

**Irish Export Board:** Mr Brian Hughes has been appointed manager of the Manchester office with responsibility for trade development in the north of England. He was previously with the British head office in London, and succeeds Mr Michael O'Neill, who has been appointed head of the Moscow office.

**Evans Medical Ltd:** Dr J. Alan B. Calver has been appointed production manager. He was formerly manager of the tablet manufacturing department. Dr Martin Cook, formerly management staff adviser, has been appointed operations manager for pharmaceuticals and biologicals, and succeeded by Dr Robin Lawrence, former chemicals product group manager. Adil P. Dehnugara has been promoted operations manager for fine chemicals.

Mr Clive Thompson, managing director of Jeyes Ltd, speaking at a dinner at the House of Commons to celebrate the company's centenary (see C&D, September 10, p350). On Mr Thompson's right is Professor Sir Ewart Jones, FRS, Professor of Chemistry at the University of Oxford. On Mr Thompson's left are Mr John MacGregor, MP for South Norfolk; Sir Adrian Cadbury, chairman of Cadbury Schweppes; Mr Leslie Porter, president, Institution of Grocers' Distribution; Mr A. K. Slipper, managing director of Cadbury Schweppes' health and chemicals division.





# Market News

## Vitamin prices change

London, September 28: Most of the vitamins that are not made in the UK have now been reduced as forecast in last week's report. This has been made possible by the stronger position of the pound. At the same time other vitamins manufactured in Britain by a leading maker are also cost more. These include thiamine, nicotinic acid, nicotinamide and vitamin A which have not changed for a considerable time.

Little trading was transacted in the essential oil sector during the week but prices, where tested, held fairly steady. Chinese citronella was a little firmer while Brazilian peppermint eased on the spot.

Among spices pepper was up by approximately £100 ton and turmeric by £35. The feature in aromatic seeds was again provided by cumin which advanced sharply. A poor crop reported by the chief producer country, Iran, coupled with US buying sent the Egyptian up to £980 ton (from £915) and Turkish to £1,100 (from

£905). Dill and maw seeds were easier. Among botanicals Cape aloes and benzoin were reported easier but higher were the balsams, cascara, gentian, hydrastis, henbane, labolia and senega.

## Pharmaceutical chemicals

**Ascorbic acid:** (Per kg) £6.94 5-kg; £5.94; 25-kg £5.44 sodium ascorbate, as for the acid; coated, £7.14, £6.14, £5.64 respectively. Calcium ascorbate £7.49, £6.49 £5.99 respectively.  
**Biotin:** Crystals £6.66g; £4.91g in 50-g lots.  
**Calcium pantothenate:** £7.29 in 25-kg lots.  
**Carotene:** Suspension £30.95 kg; 5-kg £29.95 kg Crystalline £171.17 and £170.17 respectively.  
**Cyanocobalamin:** £3.39 g; £2.39 g in 100-g lots.  
**Dexpantenol:** (Per kg) £11.61; 5-kg £10.61.  
**Dextromethorphan:** £156.20 kg; £155.20 kg in 5-kg.  
**Folic acid:** (kg) £43.34; 5 kg £42.34; 25-kg £41.84.  
**Nicotinamide:** (kg) £5.71; £4.71 (5-kg); £3.96 (50 kg).  
**Nicotinic acid:** £5.71 kg; £3.96 kg in 50-kg lots.  
**Pyridoxine:** (Per kg) £26.61; 5-kg £25.61; 25-kg £25.11.  
**Riboflavin:** (Per kg) £29.27; 5-kg lots £28.27; 25-kg £27.27; diphosphate sodium £75.88 and £74.88 respectively.  
**Sodium pantothenate:** (Per kg) £13.79; £12.79 in 5-kg lots.  
**Thiamine hydrochloride:** Per kg £17.45; 5-kg £16.45; 25-kg £15.95; mononitrate as for hydrochloride.  
**Tocopherol:** DL alpha £17.34 kg; 5-kg £16.34 kg.  
**Tocopheryl acetate:** Oil £15.38 kg; £14.38 kg in 5-kg lots; £13.88 (20-kg). Powder 25% £14.97; £13.97; £13.47; 50% £15.66; £14.66; £14.16 respectively.  
**Vitamin A:** (Per kg) acetate powder 500,000 iu/g, £14.56; £13.56 in 5-kg lots. Palmitate, oil 1 mu £14.83; 5-kg £13.83.  
**Vitamin D<sub>3</sub>:** Type 500, 24.55 kg; £23.55 (5-kg lots).  
**Vitamin E:** See tocopheryl acetate.

## Crude drugs

**Aloes:** Cape £1320 ton spot; £1,300, cif. Curacao £2,500, cif.  
**Balsams:** (kg) Canada: firm at £11.50 spot; £11.40, cif. Copaiba: £2.10 spot; £1.90, cif. Peru: £6.15 spot; £5.95, cif. Tolu: £4.25 spot.  
**Benzoin:** Block £110 cwt spot; £109, cif.  
**Cascara:** £1,000 metric ton spot; £980, cif.

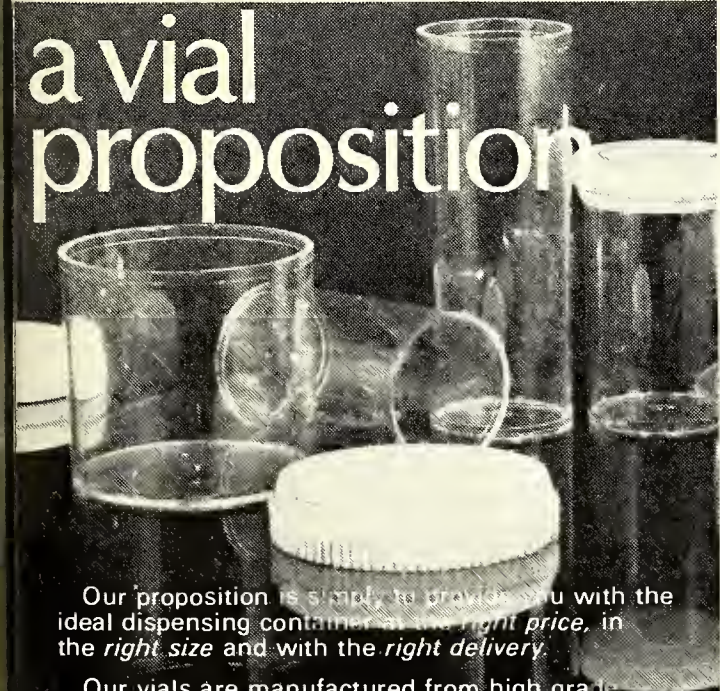
**Cherry bark:** spot £770 metric ton; £740 cif, new crop.  
**Chillies:** New Guinea birdseye £2,250-£2,275 metric ton.  
**Cloves:** Madagascar or Comores £4,300 metric ton, cif.  
**Dandelion:** New crop for shipment £1.20 kg cif.  
**Ergot:** Portuguese-Spanish £1.80 kg spot; £1.40, cif.  
**Gentian:** Root £1.39 kg spot; £1.34, cif.  
**Ginger:** Cochín current crop £1,315 ton, cif; new crop, Jan-Feb shipment £1,040, cif; Jamaican withdrawn; Nigerian split £1,250 spot; peeled £1,440, cif.  
**Henbane:** Niger £1,070 metric ton spot; £1,020 cif.  
**Hydrastis:** (kg) £9.55 spot; £9.40, cif.  
**Ipecacuanha:** (kg) Costa Rica £8.30 spot nominal.  
**Lobelia:** American £1,220 metric ton spot; European £1,100 spot; £1,090, cif, shipment.  
**Menthol:** (kg) Brazilian £10 spot and cif. Chinese £11 in bond nominal; £10.50, cif.  
**Pepper:** (ton) Sarawak black £1,550 spot; £1,440, cif. White £1,800 spot; £1,850, cif.  
**Seeds:** (metric ton, cif) Anise: China star steady at £8.40. Caraway: Dutch £1,110. Celery: Indian £800. Coriander: Moroccan £650 (Oct-Nov); Indian £525. Cumin: Egyptian £980, Turkish £1,100, Iranian £1,300, Dill: £180, Maw: £650.  
**Senega:** (kg) Canadian old crop £13.20 spot; new crop £12.80, cif.  
**Turmeric:** Madras finger £645 ton, cif.  
**Witchhazel leaves:** Spot £2.20 kg; £2, cif.  
**Valerian:** Pakistan root £1,280 metric ton spot; £1,250 forward; European £2,000; £1,950 forward.

## Essential oils

**Anise:** (kg) £17 spot nominal; £16.25, cif.  
**Citronella:** Ceylon £1.35, kg spot; £1.35, cif. Chinese £2.25 spot; £2.35 cif.  
**Clove:** Madagascar leaf, £2.40 kg spot; £2.50, cif. English-distilled £48-£50 nominal.  
**Eucalyptus:** Chinese £1.78 kg spot and cif.  
**Patchouli:** Chinese £12 kg spot; shipment not offering.  
**Pepper:** English-distilled ex-black £160 kg.  
**Peppermint:** (kg) Arvensis-Brazilian £5.35 spot; £5.30, cif. Chinese £5.10 spot; £5.40, cif. Piperata, American Far-West from £25, cif.  
**Spearmint:** (kg) American Far-West £16. Chinese spot £13, shipment £12.50, cif.

The prices given are those obtained by importers or manufacturers for bulk quantities and do not include value added tax. They represent the last quoted or accepted prices as we go to press.

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'JUSTSO' WRIST STRAPS  
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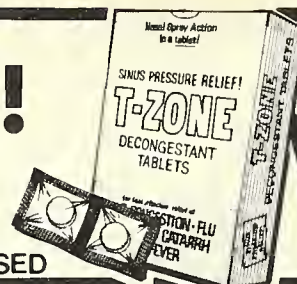


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## Appointments

### SALES MANAGER required

for expanding cosmetics company. Top salary, fringe benefits etc., for the right person.

Please write with details  
**BONNE BELL LTD.**  
York House, Empire Way,  
Wembley, Middlesex

**International Cosmetic Company** with unique range. Wish to expand its distribution throughout the U.K. We require live wire agents calling on department stores and chemists etc.

Apply to: Managing Director,  
**BONNE BELL LTD.,**  
York House, Empire Way,  
Wembley, Middlesex  
Tel.: 01-903 3462

## CLASSIFIED ADVERTISEMENTS

Situations Vacant?  
Hospital Appointments?  
Trade Services?  
Business Opportunities?  
Wanted?  
For Sale?

A classified advertisement in Chemist & Druggist gets results.

Put it to the test by posting us your next ad. or by telephoning us on: 01-353 3212.





FOLLOWING THE SUCCESSFUL LAUNCH OF  
**Frusemide**

**Arthur H. Cox & Co. Ltd.**

NOW INTRODUCE

**Diazepam (tabs) B.P.**

INTO THEIR RANGE OF GENERICS

- Another high turnover, new generation generic
- Manufactured and packed to Cox's stringent quality control standards
- Fast, reliable delivery
- Available in three strengths:

2mg	500
	1000
5mg	500
	1000
10mg	500

Available from most whole-salers, through our representative or sales office.

ARTHUR H. COX & CO. LTD., 93 LEWES ROAD  
BRIGHTON, SUSSEX. BN2 3QJ.



**Having achieved record sales of the Micron shaver,  
we're now ready to launch it.**

Announcing the No. 1 foil shaver on the continent.

The new Braun Micron.

Over there, it's broken all records.

Over here, the first wave of demand will hit the shops this autumn, when we're launching the biggest campaign ever seen for a shaver.

The key to the Micron's success is its new foil geometry.

Each hole has six precision cutting angles designed to trap stubble quickly, hold it firmly, and cut it closely.

Because the Micron's shaving head is so narrow, it

shaves even more efficiently in those 'hard-to-get-at' places.

And its new extendable long-hair trimmer makes for maximum trimming comfort and accuracy.

We've even given it a new multi-purpose case that's a wall container, travelling case and portable shaving mirror all in one.

Come October, your customers will be watching it on TV.

Another example of Braun putting their products

where your customers can see them. We'd like to suggest you do the same thing - by stocking up now before your Xmas rush.

**BRAUN**



# NEW Vaseline INTENSIVE CARE HAND CREAM— TO EXPAND YOUR HAND PROTECTION BUSINESS



*Is there really potential for expansion?*

YES! In research, housewives have confirmed that protecting the hands is an extremely important part of the daily routine. Products currently available are considered too heavy and greasy while even rubber gloves make the hands perspire.

*Is Vaseline INTENSIVE CARE HAND CREAM a superior product?*

YES! In research amongst protection cream users, 95% preferred it for

- \*protective qualities
- \*water resistance
- \*ease of rubbing in/lightness
- \*non greasy

75% wanted to buy it, and use it, immediately!

*Will Vaseline INTENSIVE CARE HAND CREAM be heavily advertised?*

YES! £300,000 will support this important product launch, with a dominant £220,000 advertising plan—twice as much as any other protective hand cream is currently spending. Full colour pages in top Womens Magazines will be continuously featured throughout the year—starting 10th October 1977.

**SUBSTANTIAL LAUNCH  
BONUS NOW AVAILABLE**

**ASK YOUR WHOLESALE OR  
CHESEBROUGH-POND'S  
REPRESENTATIVE FOR DETAILS**